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FACTORS INFLUENCING A BATTERED WOMAN'S
PERCEPTION OF CONTROLLABILITY IN VIOLENT
INTIMATE RELATIONSHIPS

by

Patricia Ann Chin, R.N., M.S.N.

A dissertation presented to the
FACULTY OF THE PHILIP Y. HAHN SCHOOL OF NURSING
UNIVERSITY OF SAN DIEGO

In partial fulfillment of the
requirements for the degree
DOCTOR OF NURSING SCIENCE

Dissertation Committee

Mary P. Quayhagen, DNSc, RN, FAAN, Chairperson

Mary Ann Hautman, PhD, RN

Patricia W. Anderson, PhD

1992

ABSTRACT

Factors Influencing a Battered Woman's Perception of Controllability in Violent Intimate Relationships

Despite the fact that domestic violence has been the focus of empirical investigation for more than twenty years, little is known about the phenomenon. While the available body of knowledge provides a sketchy picture of the abused woman and her abuser, and helps to dispel many of the myths surrounding spousal abuse, it provides very little insight into the dynamics of wife abuse. This study, based upon a foundation of the Reformulated Learned Helplessness Theory, was designed to explore the nature of the relationships among concepts that have been identified within the context of battering, and that were thought to influence battered women's responses to violence.

A causal model approach was used to investigate the influence of battering, attribution style, self-esteem estimate and perception of helplessness on battered women's perception of controllability of violence in intimate relationships. The theoretical model explained factors influencing perception of controllability of violence. An examination of the study results by hypothesis indicated that three of the four research hypotheses concerning direct effects were completely supported, and that the fourth one

received partial support. Battering, attribution style, self-esteem estimates, and helplessness accounted for 23% (F 8.45, p <.001) of the variance in internal/cognitive controllability and 28% (F 10.84, p <.001) of variance in behavioral controllability with battering exerting the greatest influence on both controllability outcomes (-.33 and -.47 respectively). Given the study findings, emphasis for therapeutic strategy development includes environmental enrichment, attribution retraining, and internal control skill development.

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DEDICATION

With love

to William, Willie, and Pam,
for their constant support
and encouragement of my adventures

ACKNOWLEDGEMENTS

I would like to express my appreciation to my dissertation chair, Mary P. Quayhagen. I am sincerely grateful for her guidance throughout the dissertation process. Her encouragement and support have helped me to establish my research focus. Professor Quayhagen exemplifies nursing scholarship.

I would also like to thank Mary Ann Hautman, not only for her contribution to this dissertation, but for her support and guidance throughout various stages of my doctoral studies. She has played a major role in my scholarly growth and development. Professor Hautman serves as the perfect role model for a nursing educator.

The contribution of Patricia W. Anderson to this effort was extremely valuable. Her understanding of statistical analysis and computer wizardry are greatly appreciated. Even more valuable were her personal attributes of patience, warmth, and cheerfulness.

I would also like to offer my sincere thanks to my family, colleagues, classmates, and many friends for their encouragement and tolerance. Their support during this time has been unconditional.

I would also thank the women who participated in the study. Without their courage the study could not have been possible.

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Chapter One

Introduction

Background of Problem

Violence, regardless of our illusion, has always been a fact of family life. The identification of the male role in procreation triggered the identification of women as the designated victims of domestic violence. A review of historical documents delineates the mechanisms through which legal, religious, and cultural legacies have supported a marital hierarchy that legalizes violence against women (Bresharov, 1990; Dobash & Dobash, 1977-78; Weitzman, 1981). Those societal attitudes, ideologies, and sanctions, that provide the underpinnings of violence against women still exist in current legal, political, religious, and economic practices (Gondolf, 1988; Gordon, 1988). They exist nationally and internationally, in technologically advanced societies (Gelles & Cornell, 1985) as well as folk cultures (Levinson, 1981). Gelles and Straus may have best described the context of domestic violence when they wrote that "People hit family members because they can" (Gelles & Straus, 1988, p 20).

Until the mid 1960s most Americans considered violence within the family system a rare phenomenon. Wife abuse in particular has been a hidden social problem. Two fundamental

factors may contribute to the hidden nature of domestic violence: denial that abuses among family members is real (Laslett, 1973). While exact figures are difficult to generate, statistical estimates indicate that between one-third and three-fourths of all American women have experienced physical violence at the hands of their intimate partner at sometime during their relationship (Gelles, 1974; Gelles & Straus, 1988).

Wife abuse has been demonstrated to be a significant, pervasive, social problem (Gelles, 1980; Straus & Gelles, 1988). In 1974, using a nationally representative sample, Gelles initially documented domestic violence as a significant national social problem. Subsequent reports by Straus, Gelles, and Steinmetz (1980), and Gelles & Straus (1988), also provide estimates on the pervasive nature of the problem. Data from these cited studies would suggest that physical assaults occur more frequently in the family than in any other setting (Straus and Gelles, 1988, p.141).

Estimates on abuse further suggest that 16 out of 100 couples in America are involved in marital violence. Annually, one point eight million wives are beaten by their husbands. Three percent of women who are severely beaten by their partner sustain an injury requiring medical intervention. One thousand seven hundred women die each year as a result of domestic abuse. Violence is a repetitive occurrence for the majority of women who experience domestic

abuse. Domestic quarrels are a factor in 20% to 40% of intra-familial homicides (Campbell, 1986b).

While wife abuse has been demonstrated to be a significant, pervasive, social problem possibly perpetuated through intergenerational transmission (Carlson, 1984; McCall & Shields, 1986), the dynamics of the phenomenon have received limited empirical investigation. Previous studies using primarily anecdotes, case studies, self-reports, literature reviews, and survey research methodologies, have focused upon describing the existence and extent of the problem, identifying the intrapsychic characteristics of battered women and of abusers (Gondolf, 1985; Shupe, Stacy & Hazelwood, 1987) and identifying the sociocultural variables that may contribute to domestic violence (Bersharvo, 1990). The sensitive and private nature of the phenomenon of wife abuse has severely limited empirical investigation into the phenomenon.

A review of the literature indicates that non-battered control groups have rarely been used for comparison of similarities and differences with acknowledged battered women. Two studies reviewed used a control group of non-battered women. Campbell (1986a; 1989) used a control sample of non-battered women to investigate the relative applicability of learned helplessness theory and a grief theory to explain behavioral responses observed among battered women. Panettiere (1988) also used a non-battered control group to investigate the effects of sexual bias, and

patriarchy on battered women's psychological development. In her study, Panettiere discusses the difficulties inherent in attempting to identify a control sample of non-battered women. Many of the women recruited to participate in her study, who originally identified themselves as non-abused women, were assessed as being abused following their initial interview. Campbell does not indicate the specific criteria used to establish the non-abused control sample in her study.

A review of the available literature also indicates that no longitudinal studies have been attempted. Subject populations are generally small, non-representative samples using publicly recognized abused women recruited from single sources with conclusions often made post hoc without empirical or theoretical support.

These studies have provided a sketchy picture of wife abuse and have helped to dispel many of the long held myths regarding battering (Gondolf, 1988). However, they have generated little understanding of the phenomenon of abuse, the dynamics of abuse, or the cumulative effects of repetitive abuse. Factors influencing an abused woman's behavioral responses, problem-solving strategies or decision-making patterns have received scant attention although therapeutic strategies focusing on these issues are proposed for counseling (Berk, Newton, & Berk, 1986; Brekke, 1987; Harris, 1986; Lewis, 1985). Interventions for assisting battered women also appear in professional literature (Ewing,

1987; Hartman, 1987; Lewis, 1983) and text books (Bolton & Bolton, 1987; Campbell & Humphreys, 1984).

Purpose of the Study

The purpose of the study was to investigate the interactions of the concepts of battering, self-esteem, attribution style, helplessness, and their contribution to a woman's perception of her controllability of violence. Identification of the nature of the relationships among these concepts could assist nurses in developing more accurate profiles of abused women. Information obtained could possibly provide a framework for: developing assessment formats for use in identifying populations at risk for the negative effects of repetitive abuse; for establishing realistic individually tailored goals, interventions, and strategies for counseling and assisting battered women encountered in practice; and for establishing effective supportive programs for empowering battered women. An understanding of the nature of the conceptual relationships and their influence on perception of control may be beneficial for specific strategies aimed at disrupting the recurrent nature of domestic violence.

This study has further significance for theory development in that it investigates the concepts of self-esteem, attributional style, helplessness, and control outside the laboratory setting. The investigation of these concepts occurs within a natural setting and uses a population of battered women, within the context of violent

relationships. The study builds upon the work of recent researchers who have proposed that the reformulated learned helplessness model may provide explanations for the behaviors (Campbell, 1986a; Finn, 1985; Walker, 1984), decision-making (Johnson, 1987; Prange, 1985; Wood, 1987), and problem-solving strategies (Clearhout, Elder, & Janes, 1982) observed among battered women. This study should provide a significant contribution to the development of both learned helplessness and attribution theory.

Few studies have explored abused women's perception of the violent aspects of their intimate relationship (Landenburger, 1987). Studies that specifically explore battered women's perceptions of control over their battering experience do not exist in the literature. The study has the additional potential for enlarging the body of knowledge regarding intimate domestic violence by exploring victims' perceptions regarding one aspect of themselves and their experiences. This study would help to extend a new dimension in the study of domestic violence. Explaining complex behavior and decision-making processes as influenced by perceptual variables may significantly benefit the body of marital violence literature (Johnson, 1987).

Significance for Nursing

Therapeutic nursing practice requires nursing research based upon theory. A comprehensive body of knowledge regarding domestic violence is necessary if nurses are to intervene effectively with women attempting to cope with

battering and its effects on their life experience. Battering is a serious health problem. The pervasive and extensive nature of the problem of domestic violence raises the possibility that every nurse in clinical practice will eventually care for a battered woman. Nurses encounter abused women in every area of nursing practice: in emergency rooms, medical-surgical units, pediatric units, obstetric services, and both in-patient and out-patient psychiatric and mental health agencies.

The majority of the 1.8 million women battered by their intimate partner each year will be seen by a nurse. One in four women seeking health care services does so as a direct or indirect result of physical abuse (Berrios & Grady, 1991; Campbell & Humphreys, 1984). Injury sustained as a result of battering is both physical and psychological in nature. Physical injuries can include: burns, cuts, fractures, internal trauma, head trauma, and miscarriages (Dobash & Dobash, 1978-79; Drake, 1982). Psychological effects can include: stress, anxiety, low self-esteem, (Walker, 1979) and severe depression (Rounsaville, 1978). Nurses may encounter women with health problems resulting from battering immediately in an emergency room or years later when these women are patients on a psychiatric unit or in an out-patient department. There is a strong correlation between child abuse and wife abuse in families where violence occurs. The initial battering episode between intimates will

often occur during a woman's pregnancy (Campbell & Humphreys, 1984; Gelles, 1975; Helton, 1985).

Often the nurse, a woman, and caring protective individual, is the health provider battered women may look to for assistance. The nursing literature offers practitioners limited information for interventions based upon research (Campbell, 1986a; Drake, 1982; Lichtenstein, 1981; Mohan, 1981).

Intimate domestic violence raises many perplexing questions for service providers (Wood, 1987). Many nurses possess the same attitudes, myths, and beliefs regarding the family, marriage, and domestic violence held by the society and social community to which they belong. The assumption held by most health professionals, and the general public, is that persons do not remain in a situation in which they experience physical abuse. The battered woman sees the abuse she experiences as one aspect or component of her intimate relationship. The health care provider most frequently sees the same relationship only within the context of abuse. Often the nurse projects the impression that battered women are responsible either for the abuse or for finding a solution to the abuse. This disparity of views can prevent women from seeking or receiving the help that they need (Landenburger, 1987). Nurses need to become aware that abused women do not see their choices simply as staying in or leaving the relationship.

Theoretical Framework

The theoretical foundation of this study is based upon Attribution Theory and the Reformulated Learned Helplessness Theory. It is the belief of the researcher that cognitive perspectives offer powerful explanations for understanding human behavior. Individuals reflect on their existence and strive to find meaning in that experience. The two theories are also consistent with the researcher's world view and her assumptions regarding human behavior and human responses. This is specifically true regarding the use of aggression by humans and human responses to violent behavior.

In this section Attribution Theory and the Reformulated Learned Helplessness Theory are briefly discussed. Their usefulness as a causal foundation for the study is presented.

Attribution theory is concerned with the individual's reflections on the actions of themselves and others and the explanations invented by the individual to account for the actions. Attribution refers to the perception about cause and the influence of cause. Two assumptions underlying the theory are that individuals try to explain actions, and that generalizations are possible about the kinds of explanations that are invented (Totman, 1982). The central core of attribution theory analysis is the distinction between internal and external causal attributions.

Three main principles of attribution theory are: that individuals use information about choices and consequences to arrive at decisions about dispositions (Jones & Davis, 1965),

that motivations can account for actor and observer differences in attribution and, that individuals search for a causal inference associated with the event to be explained (Jones & Nisbett, 1972).

There are both antecedents and consequences of attribution behavior. Antecedents of attributions refer to information about behavior and the circumstances or context in which the behavior occurs that the individual uses to infer cause. Consequences of attribution refer to behavior, affect, and expectancies that are a result of attributions or perceived causes that are made by the individual (Prange, 1985). Attribution Theory provided the core for the development of Learned Helplessness Theory.

It was from this framework of Attribution Theory that Seligman (1975) developed the original Theory of Learned Helplessness. Originally Mawrer and Viek (1948) described a phenomenon observed in humans that they identified as fear from a sense of helplessness. Experimenting with animals exposed to electric shock, they argued that uncontrollable aversive stimuli aroused greater fear in the animals than a controllable one. The initial investigation into this observed phenomenon stimulated the early work of Seligman.

The term "learned helplessness" was originally coined for use in psychology. Seligman, Abramson, Semmel, and von Baeyer (1979) used the term to describe an escape-avoidance response shown by dogs exposed to uncontrollable shock in a laboratory setting. Seligman (1975) discovered that dogs

exposed to uncontrollable shock were unable to develop avoidance behaviors that would enable them to escape the aversive stimuli. That exposure significantly interfered with the ability to escape subsequent shock. With subsequent shocks, the animals would lie down and passively accept the shocks without effort to escape. Seligman explained the behavior of the dogs using the hypothesis of learned helplessness. According to Seligman the lack of control over an unavoidable shock is the determinant of learned helplessness, not the shock itself (Seligman, Maier, & Solomon, 1971). It appears that animals exposed to outcomes that are independent of initiated responses learn that outcomes are uncontrollable. This leads to the expectation that outcomes will continue to be independent of response in the future.

Initial experimental efforts by investigators to duplicate the observations of learned helplessness in human subjects identified limitations in the hypothesis of the learned helplessness model for explaining human response-outcome expectancies. The introduction of a cognitive mediating phase in the process provided a possible explanation for expectations regarding present and past contingency. The reformulated theory of learned helplessness in humans proposed that an intermediary phase occurs between the perception and the expectation of contingency. It is during this phase that the individual makes attributions for

uncontrollable events (Abramson, Seligman, & Teasdale 1978; Seligman, 1991).

The current reformulated learned helplessness theory can be described as consisting of four steps. In the first step, object noncontingency, the individual learns that one's responses used to avoid the aversive stimuli are ineffective in producing the desired outcome. The second step involves the perception of present and past noncontingency toward the aversive stimuli. The individual cognitively reviews experiences in similar situations and evaluates the effectiveness of past responses in controlling the aversive stimuli. In the third step the individual, based upon a mental review, makes an attribution for present and past noncontingency. The attribution made can vary along three dimensions: internal versus external, stable versus unstable, and global versus specific dimensions (Mikulincer, 1986; Seligman, 1991).

Internal attributions refer to factors or causes that originate with the individual and external attributions, factors or causes that originate in the environment. Stable attributions refer to factors or causes that persist over time, and unstable attributions refer to transient factors or causes. Global attributions refer to factors or causes that are prevalent across situations and specific attributions refer to factors or causes that are unique to the uncontrollable event (Pasahow, West, & Boroto, 1982).

It is the causal attribution established in the third step that determines the context for the fourth step in the Reformulated Learned Helplessness Theory, the expectation of future noncontingency. This is a belief that future outcomes will continue to be noncontingent. It is this expectation of noncontingency that creates multiple deficits: cognitive, emotional, self-esteem, and motivational. The cognitive deficit results in difficulty learning that responses and outcomes can be contingent. The emotional deficit results in a perception of uncontrollability producing feelings of threat and anxiety. The lack of incentive to initiate voluntary responses to aversive stimuli reflects the motivational effect based upon the expectation that outcomes are noncontingent.

The ultimate cumulative effects of these four steps are the symptoms of learned helplessness and an expectation that actions, responses and outcomes are not related. Abramson, Seligman, and Teasdale (1978) propose that attributions to internal factors cause greater self-esteem loss than do external attributions. They further maintain that stable attributions produce deficits that are more long lasting than unstable attributions, and that deficits generalize more with unstable attribution than with specific attributions. Two assumptions are key to all work related to attributions: people actively construct their world and seek to make sense out of it, and this causes people to develop a set of

expectations about behavior known as a cognitive style (Antaki, 1982).

This study proposes an explanation for observations regarding battered women's behavioral responses and strategies for coping with the experience of battering relative to perceptions of violence control. Using the Reformulated Learned Helplessness Theory developed by Garber and Seligman (1980) as an underlying theoretical framework it is maintained that women who are exposed to repetitive physical abuse make causal attributions regarding those aversive events and their controllability. The woman's attribution style, as well as her current level of self-esteem, influences her perception of helplessness. This perception of helplessness then influences her perception of control over future battering that then becomes a factor influencing behavioral responses, problem-solving and decision-making.

In the study, battering represents the aversive outcome or stimuli. Attribution style, self-esteem, and helplessness will act as mediators for explaining the individuals expectations and perception of controllability over the aversive stimuli. Repetitive battering following repetitive ineffective responses to control the battering episodes, reduces the woman's perception that she is able to exercise control over the aversive outcome. This re-enforces her existing attribution style. Repeated battering and the inability to control battering also pose a major threat to

the self and results in a lowering of self-esteem. Those women who make internal, global, and stable attributions for the noncontingent outcomes develop cognitive and emotional deficits represented by helplessness. The woman also develops a self-esteem deficit represented by a negative self-esteem estimate, and a motivational deficit represented by a decreased perception of controllability over the aversive stimuli. Women with high levels of helplessness will have lowered expectations of their ability to control further violence. They also will be less motivated to initiate voluntary responses to control or avoid the aversive stimulus of battering. Figure 1 represents the relationships between the conceptual constructs, theory concepts, and empirical indicators, relevant to the proposed study.

Causal Framework

A review of the relevant literature on domestic violence, intimate battering and the Reformulated Learned Helplessness Theory of depression provided the basis for the proposed model. A time ordered recursive, causal model provides the conceptual framework for this study (Munro & Sexton, 1984, pp. 93-96). Figure 2 illustrates the proposed time orderings and relationships proposed among concepts using this type of correlation path analytic model. Direct linkages between concepts are time ordered and recursive. Unidirectional arrows, with indicators for positive and negative influences, indicate the directions of

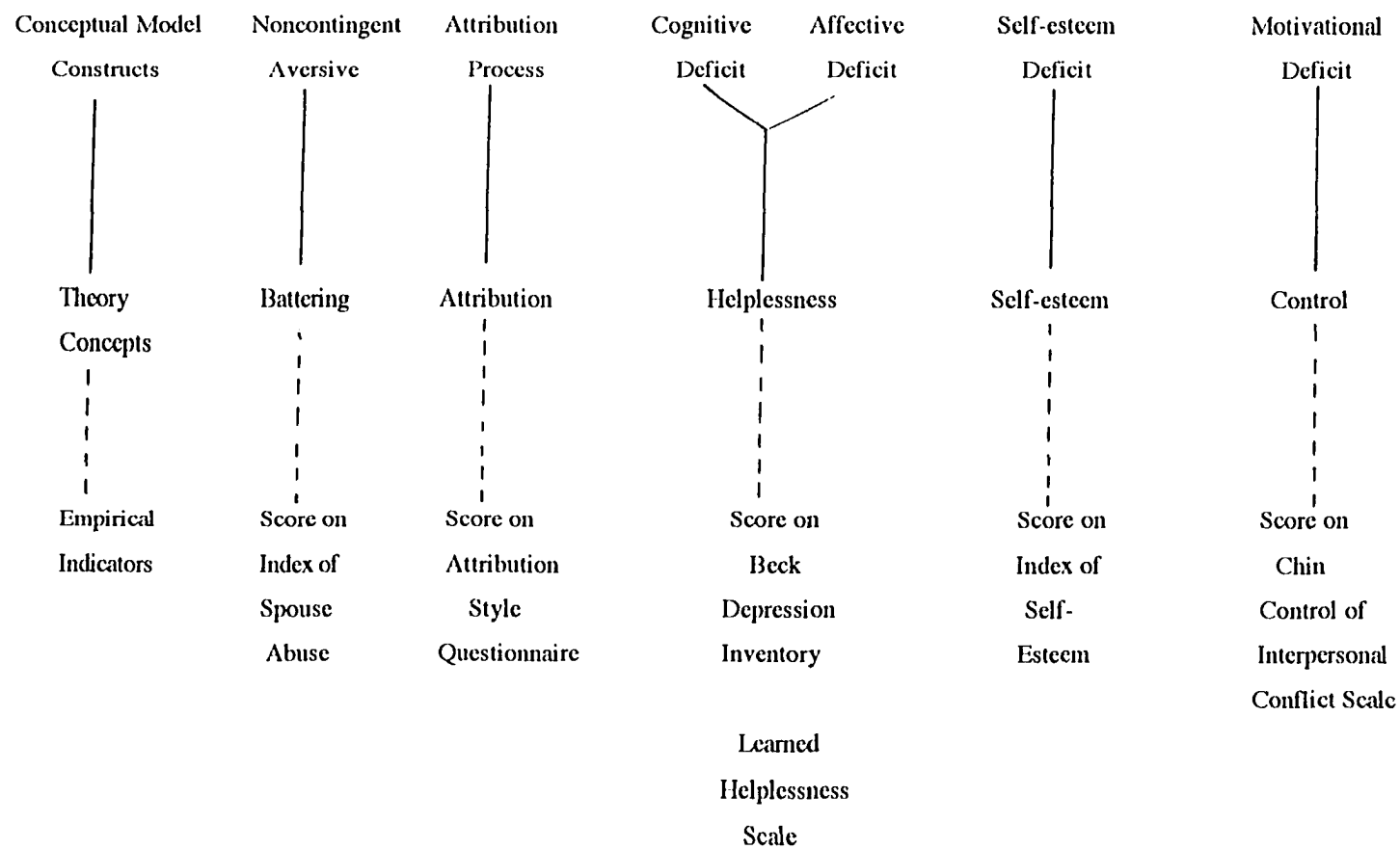


Figure 1. Conceptual Constructs, Theory Concepts, and Empirical Indicators Utilized in the Proposed Model

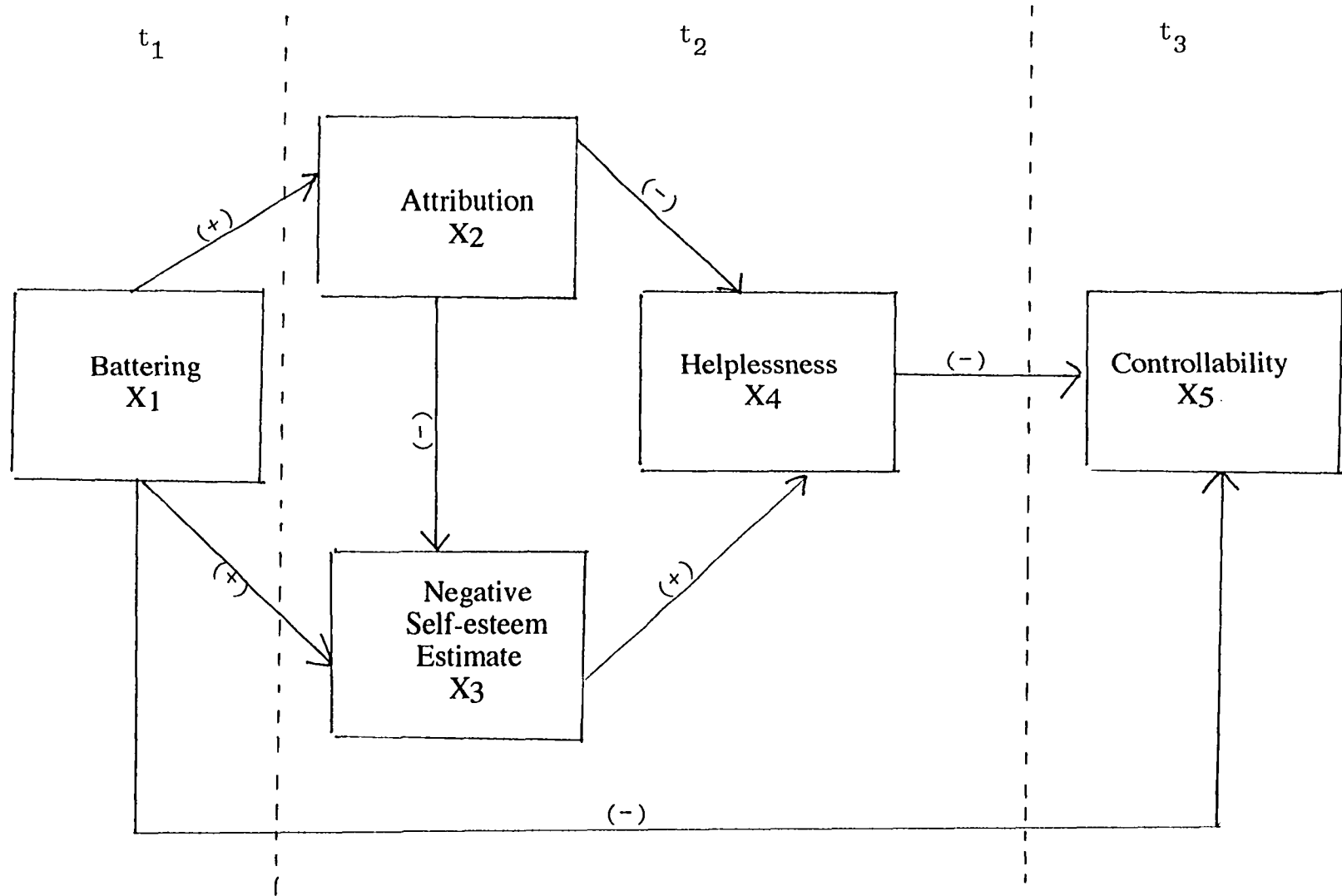


Figure 2. Proposed Causal Model: Controllability of Violence

the hypothesized relationships (see Figure 2). Using this framework the exogenous concept, battering, has its variance determined by causes outside the model. Concepts within the model explain the variance of the endogenous concepts: attribution style, self-esteem, helplessness, and perceived controllability of violence.

Hypotheses

There are fourteen implied hypotheses. The seven hypotheses that illustrate the theoretical rationale for this study and that provide the matrix for structural representation are as follows:

1. Battering (X_1) has a direct positive effect on attribution style for positive events (X_2) and on negative self-esteem estimates (X_3) and a direct inverse effect on perceived controllability of violence (X_5).

$$X_1 \overset{+}{\dashrightarrow} X_2 ; \quad X_1 \overset{+}{\dashrightarrow} X_3 ; \quad X_1 \overset{-}{\dashrightarrow} X_5$$

2. An internal, attribution (X_2) style for positive events has a direct inverse effect on negative self-esteem estimates (X_3) and a direct inverse effect on helplessness (X_4).

$$X_2 \overset{-}{\dashrightarrow} X_3 ; \quad X_2 \overset{-}{\dashrightarrow} X_4$$

3. Negative self-esteem estimates (X_3) have a direct positive effect on helplessness (X_4).

$$X_3 \overset{+}{\dashrightarrow} X_4$$

4. Helplessness (X_4) has a direct inverse effect on perceived controllability of violence (X_5).

$$X_4 \overset{-}{\dashrightarrow} X_5$$

5. Battering (X₁) has an indirect effect on perception of controllability of violence (X₅) through attribution style (X₂), negative self-esteem estimates (X₃), and helplessness (X₄).

X₁ ----- X₂ -----X₃ -----X₄ -----> X₅

6. Attribution style (X₂) has an indirect effect on perceived controllability of violence (X₅) through negative self-esteem estimates (X₃), and helplessness (X₄).

X₂ -----X₃ -----X₄----->X₅

X₂-----X₄ ----->X₅

7. Negative self-esteem estimates (X₃) have an indirect effect on perceived controllability of violence (X₅) through helplessness (X₄).

X₃ -----X₄ ----->X₅

In conclusion, violence has always existed in the family. Legal, religious, and cultural mechanisms support a marital hierarchy that legalizes violence against women. Even though domestic abuse is acknowledged as a significant, pervasive, social problem, limited knowledge is available regarding the phenomenon. A sketchy picture has evolved regarding the battered woman but little understanding exists about wife abuse, its psychodynamics, or the effects of repetitive abuse. Factors influencing an abused woman's behavioral responses, decision-making, or problem-solving strategies have received little attention. It is possible that knowledge regarding the relationships among the concepts under investigation may be beneficial for expanding the body

of knowledge of Learned Helplessness Theory, and Attribution Theory. The study findings will also extend the body of knowledge regarding battering and domestic violence by investigating battered women's perception of control. The study findings will contribute to nursing practice and propose an explanation for battered women's behavioral and affective responses to violence.

Chapter Two

Review of the Literature

Although wife battering has been documented as a serious and pervasive health and social problem, scholarly inquiry regarding the phenomenon is relatively new. A limited amount of literature is available for review, however, that allows for a current and comprehensive review. This section will begin with a discussion of the historical, social, and cultural context of wife abuse. That will be followed by a brief overview of several of the prominent theoretical frameworks that have evolved to explain why woman abuse exists. A review and critique of empirical investigations is also presented. Finally, investigations involving attribution, learned helplessness and wife abuse will be reviewed.

Historical, Social, Cultural Context of Battering

Generally, the perception of the family is one of a supportive social group, concerned with the welfare of its members, committed to non-violence, and a place of safety and security. Until the 1960s most people considered violence within the family system a rare phenomenon. In a review of historical and contemporary documents Dobash and Dobash (1977-1978) indicated how legal, religious, and cultural legacies have supported a marital hierarchy legalizing

violence against women since around 753 B.C. Those ideological and social patterns, which have been the underpinnings for violence against women, continue to influence current legal, political, religious, and economic practices (Bersharov, 1990; Bogard, 1988; Davidson, 1977; Dobash & Dobash, 1988). Dobash and Dobash elucidate the place of marital violence within a social-historical context that has appointed wives as the appropriate victim of marital violence (1977-1978, p.426).

The literature reviewed by Dobash and Dobash established that historically the only permissible roles allowed for women were those of wife, mother, daughter, lover, whore, or saint. The only type of relationship appropriate for women to have with men within such a context is a personal relationship.

Women in historical referents are nameless, undifferentiated, undistinguished, and indistinguishable. Rarely will women's names appear or will women be discussed as individuals except in terms of an ability or inability to fulfill family obligations. All women are alike; merely members of some man's family. Few legitimate means have ever existed for women to change or manage the patriarchal hierarchy organization of society that distanced them from resources, power, or legal sanctions (Yllo & Bogard, 1988). Religious teaching, accounts, and descriptions (Ditzion, 1979) further emphasized the appropriateness of blaming and punishing women for transgressions, and common law maintained

a tradition of permitting the physical chastisement of wives. Men have always had more leeway in abusing their wives than in assaulting strangers (Gelles & Cornell, 1985). As a result of their research, Dobash and Dobash hypothesized that women are preferred victims of family violence around the world.

Levinson (1981) concurs with the historical research findings of Dobash and Dobash. Levinson examined records of Human Relations Area Files for sixty small societies and folk cultures representing all the major cultural regions of the world. Levinson found that physical wife abuse was a common or frequent occurrence. In four of ten societies, abusive behavior exists in the form of beating, clubbing, kicking, isolating, disfiguring and killing.

Several conclusions can be drawn from review of these cross-cultural studies. Women are most likely victims of violence (Levinson, 1981). Wife abuse is more common in developed nations where social disorganization emerges as a result of modernization (Laslett, 1973; Lester, 1980). The studies also suggest that the more women are viewed as the property of their mates, the greater the risk of abuse. In addition, the more dependent women are upon their mates the more likely they are to be abused (Lester, 1980; Gelles & Cornell, 1985). While studies identify the historical-social-cultural context of wife abuse, they do not address the perceptions of abused women existing in that context nor

the efforts women have made to confront and cope with their violent experience.

Gordon (1988) examined the case reports and records of New York social workers and child-protective agencies for the period 1880 to 1960. She analyzed the material from a feminist perspective using the "resource" theory of William Goode (1971). Gordon's analysis depicted wife-beating as a social problem sanctioned and controlled through culture, religion, and law. This depiction is similar to that of Dobash and Dobash (1979) and Levinson (1981). Moreover, Gordon observed the role of norms, friendship, kinship, and neighborhood groups in sanctioning wife-beating. She maintains that social records support the view that a wife becomes a battered woman because of her socially determined inability to resist or escape: her lack of economic independence, lack of empathetic law enforcement services, and lack of self-confidence. She further maintained that the female gender has been influenced by millennia of violence, and a socialization toward passivity.

Patterns of behavior have been identified, based on Gordon's analysis, which indicate that women have resisted the violence exercised against them. Gordon has documented how women used existing social sanctions, agencies, or legal avenues available to protect themselves and their children. Gordon concluded that the victimization of American women from 1880 to 1960 could not be denied. She also concluded

that there also exists a legacy of bravery, resilience, and ingenuity within a reality of extremely limited resources.

Gordon's (1988) analysis of social service records also indicates that women have been as aggressive, irrational, and self-destructive as men in marital conflicts. However, since women's relationships have been structured by coercion, they have developed greater cooperative socially manipulative skills to control their situation. Gordon argues that in most marriages, even in patriarchal societies, men's and women's interests are complementary as well as adversarial, because their economic interests are joined. Gordon's analysis reflects only the experience of women and families using social agencies and departments in a specific geographical area at a specific historical point.

The existence of violent relationships does not appear to be on a decline even with the consciousness raising that has occurred. Researchers investigating dating and courtship relationships have identified a growing incidence of abuse and violence among college students as well as increased acceptance of violent behavior by that age cohort. Makepeace (1981) identified the need to investigate violence during this developmental period. In this study, 61.5% of the sample had personally known someone who had been involved in courtship violence, and one-fifth had had at least one personal experience. One subject reported having experienced violence during dating on eight separate occasions. Henton, Cato, Koval, Loyd and Christopher (1983) found in interviews

with college students, on two university campuses, that young women would rather be in an abusive relationship with a male than in no relationship.

In summary, the review of historical references and documents has confirmed that a social-cultural religious context has existed throughout time that identifies women as the appropriate victims of domestic violence. Within this context the discriminating attitudes of society toward women have placed them in a subordinate position and created an environment that both initiates and sustains violence directed against women. This context exists today on both national and international levels. Limited empirical evidence exists to indicate how women have resisted violence in their relationships nor what the effect such resistance may have had on altering or maintaining the violent context. Gordon (1988) proposes that it has been the efforts of abused women to resist violence in the home that has produced change in social and legal attitudes toward domestic violence. Further analysis of the family as an historically situated social institution would increase knowledge of the phenomenon of domestic abuse.

Relevant Theoretical Perspectives

A variety of theories have evolved to explain the existence of wife abuse. These theories vary in their perspectives as to why women are battered and who is responsible for their battering. In this section, five prominent theoretical frameworks explaining wife abuse are

briefly presented: general systems theory, social learning theory, social economic theory, interpersonal relationship theory, and feminist sociological theory. These perspectives vary from viewing violence as a normative process of society (Straus, 1973) to seeing violence as a commodity to be exchanged in the family economic system (Goode, 1971).

General systems theorists view violence as a systematic product of the family's multivariate social and psychological interactions. Straus (1974) identified variables influencing domestic violence. Antecedents variables include: family members' characteristics, societal structure, organization and interaction within the family. Precipitating factors include: family stress, frustrations and problems. Consequence variables include: the results of violence for family members and for society. The consequence variables support or diffuse the antecedent variables resulting in continuation and maintenance of the system. This feedback process will either increase or diminish the frequency of domestic violence and may explain the escalating spiral of violence over the duration of a relationship.

Social learning theorists view domestic violence as a learned response to feelings of anger and/or frustration. Individuals who are exposed to violence as children (Owens & Straus, 1975; Peterson, 1980) role model the behavior and transmit it through socialization (Carroll, 1979; Hutchings, 1988; Steinmetz & Straus, 1974). There appears to be a relationship between harsh physical punishment and the

appropriateness of violence as social control. The combination of the experience of exposure to violence as a child with social interaction as well as with mass media's presentation of the tough often violent male as representative of the highly desired trait of masculinity, reaffirms the stereotypes and value of violence (Prange, 1985).

Social economic theorists link the variables of economic power, prestige, and respect, likability, and attractiveness with threat and force in a family economic system. Family members meet their material and psychological needs through acquiring and exchanging these factors. Goode (1971) hypothesized that force and violence serve to maintain the internal stability of the family system. Social economic theorist propose a relationship between the use of force and violence against women and changing expectations of women and the increase in their demands for equality and status.

Interpersonal relationship theorists use rules governing relationships to explain why violence may occur. In a theoretical paper Hepburn (1973) proposed that all interpersonal behaviors exhibited between people occur within the context of the situation. He suggests that violence is the final event in a series of tactics. The relational context may be accountable for the occurrence of violence. The individual, feeling a threat to a social identity, will react according to the perception of the intentions of the other person. If they believe that the other person knows

better, then violence is more likely to occur than in cases in which the other person is viewed as not being held accountable for the threat. This theoretical perspective has never been empirically investigated. However, Straus (1974) explained findings that verbal aggression increases the probability of physical violence using this theoretical perspective.

Feminist sociological theorists believe that unequal power and sex role stereotyping are central factors in the occurrence and dynamics of wife battering (Bogard, 1982; Pagelow, 1981; Yllo & Dobash, 1988). The subordinate position of women within the nuclear family and in society initiates, maintains, and supports the violence directed toward them. Sexual inequality and the unequal distribution of power and resources between women and men sanction the use of force as one way of maintaining male superiority (Schechter, 1982). Sexism may also contribute significantly to the woman's feelings of helplessness and worthlessness once abuse occurs. Limited economic opportunities (Gelles, 1976; Straus, 1974), financial dependency on the abusive partner (Kalmuss & Straus, 1982; Strube & Barbour, 1983), sex role expectations, unequal child rearing responsibilities (Gayford, 1975) create an environment where the woman fails to identify options and choices other than to remain in the violent relationship tolerating increasing degrees of violence. From the feminist perspective the study of wife

abuse attempts to integrate scholarly inquiry and social action (Bogard, 1988).

In summary, the theoretical literature presents a variety of internal and external factors used to attempt to explain the dynamics and occurrence of wife abuse. The identification of potential significant influencing factors, the degree of influence exerted by those factors, or the interactions that may exist among those factors are important for developing a comprehensive understanding of the phenomenon of wife abuse.

However, while several theoretical perspectives do dominate the literature on wife abuse, and theoretical underpinnings are present in some of the available empirical literature, few studies can be identified that test those theoretical views or provide support for the propositions proposed in them. The evolving theoretical perspectives focus predominantly upon the role of the female in violent and abusive conflict situations. Limited theoretical perspectives attempt to explain the behavioral, decision-making or problem-solving repertoires used by battered women.

Domestic Violence

The existence of marital violence has been demonstrated to have existed throughout time, and is shown to be a pervasive social problem (Campbell & Humphreys, 1984; Rosenberg & Mercy, 1985; Stark, Filtcraft, & Frazier, 1979; Straus, Gelles, & Steinmetz, 1980; and United States Department of Justice, 1984). Four retrospective studies

using police reports and homicide statistics (Berk, Berk, & Loseke, 1983; Brown, 1986; Fagan, Stewart & Hansen, 1983) demonstrate a high correlation between past incidence of abuse and physical assault and the subsequent murder of wives.

The sources for reports regarding the existence and extent of the problem of wife abuse are self-report, self-survey, and the retrospective review of hospital records, police reports and homicide statistics. Women, not men, are generally the source for generating information about the existence of battering. Official reports and survey research generally reflect only an estimate of the exact parameters of wife abuse. Actual figures on wife abuse are difficult to generate since reporting practices regarding wife abuse differ from state to state and even institution to institution, and the fact that males generally do not perceive battering behavior as deviant or reportable behavior (Stanko, 1988). At this time there are no legal requirements or federal or state agency mandates to report incidence of wife abuse (Campbell & Humphreys, 1984). However, the available reports do provide evidence regarding the incidence, intensity, and significance of this societal problem.

Kempe, Silverman, Steele, Droegemueller, and Silver (1962) brought the issues of domestic violence to the awareness and attention of lay, professional, and political forces with their article "The Battered Child Syndrome."

Even though wife abuse is a significant concept in studies of child abuse it has been a victim of selective inattention by researchers and theorists. No published research studies of wife abuse exist in the published literature before the mid-1970s. Most of the empirical study of the phenomenon in the seventies and early eighties dealt with establishing the existence and extent of wife abuse. The emphasis of those investigations focused on the identification of intrapsychic, demographic and situational factors related to marital violence.

Battered Women

Social scientists have exercised "selective inattention" (Gelles, 1977) as well as a conservative view point concerning wife abuse (Pleck, Pleck, Grossman, & Bart, 1978). The heading of "spouse abuse" did not appear in social literature indexes until 1972. Studies before the 1970s largely dismissed the problem of wife abuse as the result of wife provocation (Gondolf, 1988). Abuse was determined to be personal, psychological deficiencies. Snell, Rosenwald, and Robey (1964) depicted battered wives as frigid, manipulative and spiteful. Medical physicians traditionally treated women reporting abuse with sedatives and admonitions not to antagonize their husbands (Stark, Flitcraft, & Frazier, 1979).

Since the mid-1970s descriptive empirical studies have provided the means to create a picture of the battered woman and the factors surrounding marital violence. While there is

no psychological profile of the battered woman, some commonalities exist (Star, 1978; Star, 1980; Thorman, 1980). Battered women are described as dependent (Kalmuss & Straus, 1982), having low levels of self-esteem, expressing feelings of inadequacy and helplessness, and depression (Ball, 1977; Walker, 1979). Others describe battered women as nonassertive and shy (Weitzman & Dreen, 1982) and even others as aggressive, frigid, and masculine (Snell, Rosenwald & Robey, 1964). The average age of the battered woman is 30 years of age (Fagan, Stewart, & Hensen, 1983; Gayford, 1975; Gelles & Straus, 1988; Straus, Gelles, & Steinmetz, 1980). The average educational level is 12.1 years (Gelles & Straus, 1988; Walker, 1979). The majority of reports and observation of wife abuse use women from low-income and low-socioeconomic status families (Gayford, 1975; Gelles & Cornell, 1985; Gelles & Straus, 1988; Straus, Gelles, & Steinmetz, 1980) and when there is a high incidence of unemployment among battering couples.

Social stress and isolation are two strongly related risk factors for potential abuse (Gelles & Cornell, 1985). Nearly all studies of marital violence note abuse of alcohol by the abuser, although the nature of the relationship between alcohol and violence is unclear (Campbell, 1986a). Several researchers report a high rate of observed marital violence in childhood by both abused women and abusers (Carlson, 1984; Gelles & Cornell, 1985; Peterson, 1980; Straus, 1974; Walker, 1979) although no studies have

investigated the influence children might have on the battered couples' coping strategies and responses to violence.

Several major limitations to these studies exist which challenge their validity. These threats to validity relate to difficulties of investigating the phenomenon of domestic violence, and the context in which it occurs, the family. Published reports of researchers have relied entirely on small recruited clinical samples of abused women, and only two studies could be located that used non-abused control groups. Self-referral, or referrals from social service agencies, emergency rooms, police departments, prisons, shelter residencies, self-help groups, mental health facilities or therapy programs are the major sources for subject recruitment. There is a greater than average representation of individuals who utilize social services or who come to the attention of authorities and social service agencies, and there is greater representation from minority groups, low-income families, and lower socioeconomic groups.

There is a possibility that the study findings reflect factors related to race, culture, ethnic groups, or social status in these samples. Women who did participate in these studies represented women who have made a decision to do something, even if only temporarily, about the battering relationship in which they were involved. No longitudinal studies exist in the published literature, nor did any of the

studies appear to be building upon empirical data reported in other studies.

In summary, while descriptive studies that have focused on quantifiable concepts have been helpful in providing a sketchy picture of the abused woman, they provide little insight into the relationships between intra-psychic, demographic, or situational factors influencing wife abuse (McNeely & Robinson-Simpson, 1987). The studies do not provide insight into the dynamics of the complex phenomenon of wife abuse nor address behavioral responses, decision-making, problem-solving, or controlling strategies used by battered women within the context of the violent relationship.

Factors Influencing Women's Responses to Battering

Even with the limited empirically established information available regarding domestic violence, it appears that domestic violence is a complex phenomenon. It is not a one time event, but rather a cyclic pattern of behavior that endures over a considerable time (Walker, 1984). While Okum (1986) maintains that eventually the majority of battered women leave an abusive relationship, limited information is available about the thought processes or decision-making process involved in the decision to leave or remain in the relationship. The lingering question for both the lay and scientific communities often remains: Why does the battered woman remain in violent relationships?

Several studies are available that attempt to identify significant factors that differentiate women choosing to remain in violent relationships from women who seek help or terminate their abusive relationships. Women who eventually left an abusive relationship report experiencing more severe and more frequent violence (Gelles, 1976). Women who were exposed to violence in their families during their childhood remained in violent relationships longer (Gelles, 1976; Walker, 1979). Women with limited educational background, less marketable vocational skills, were unemployed, and came from low-economic households remained in or returned to battering environments (Gelles, 1976; Johnson, 1987; Kalmuss & Straus, 1982; Pagelow, 1981; Strube & Barbour, 1983) more frequently than those with available external resources, although Strube and Barbour (1983) suggest that economic dependency is a mediating variable rather than a causal one.

Hilberman and Munson (1978) and Rounsaville (1978) report that fear appears to be a major factor in decision-making among battered women, especially the fear of retaliation for taking an action in response to having been battered. Emotional investment, commitment to the marriage or relationship, and psychological marital dependency were identified as psychological factors keeping women in an abusive relationship (Kalmuss & Straus, 1982; Strube & Barbour, 1983).

Pagelow's (1981) findings did not support the findings of the above studies in certain aspects. In her sample,

severity and frequency of violence did not influence a decision to leave or remain in a violent relationship. Her investigation also did not support an association between childhood violence and decisions to continue or terminate a violent relationship. Pagelow's sample differed from other samples in that her sample was constituted only of women who had permanently left their abusers. None of the women were currently in a battering relationship.

In summary, several studies have been conducted that attempt to answer the pervasive question regarding battering, why do battered women remain or return to the abusive relationship. A variety of factors appear to be significant factors. These factors are both internal and external and include: frequency and severity of abuse, childhood exposure to violence, educational background, vocational skills, economic dependency, fear, emotional commitment and marital dependency. However, these studies have limited internal and external validity.

The majority of the studies use samples that are over representative of lower socioeconomic groups, include subjects seeking help in a shelter, are retrospective in nature, and use self-report and survey methodologies. No replication studies exist in the published literature. While these studies attempt to explain why women remain in abusive relationships, few studies focused on the question of why women return to those relationships after a period of separation. Even fewer studies exist which explore the

process of entrapment in a violent relationship (Landenburger, 1987) or disengaging from a violent relationship (Landenburger, 1987; Turner & Shapero, 1986).

Victimization

Similarities exist between the strategies used on prisoners of war and those employed by batterers. Similarities that have been identified as being used by both include: psychological abuse within the context of physical violence, the use of emotional dependency associated with intermittent reinforcement, and isolation from a support system validating the assailant's beliefs and behavior (Farber, Harlow, & West, 1957). In both cases there is an attack on the individual's self-identity, and control of behavior through coercion. Both groups reported constant interrogation and forced participation in discussions that resulted in accepting fault by the victim (Schein, 1961; Walker, 1979). A common form of punishment in both instances included humiliation and degradation. The sexist context in which battering occurs centers about a patriarchal, hierarchical family structure. The intimate nature of the battering relationship may serve to strengthen the effectiveness of psychological abuse (Romero, 1985).

There appear to be common psychological responses experienced across a wide variety of types of victimization (Janoff-Bulman & Frieze, 1983). Among the most commonly documented emotional responses to victimization are behaviors reflecting emotional numbness and maladaptive

passivity (Peterson & Seligman, 1983), shock, confusion, anxiety, fear, and depression (Burgess & Holmstrom, 1974). Reports of reactions to rape (Ellis, Atkeson, & Calhoun, 1981) and physical assaults include feelings of worthlessness, loss of ability to experience pleasure, suicide attempts, somatic complaints, fears and phobias (Katz & Mazur, 1979). Burgess and Holstrom (1974) observed decreased social activities, nightmares, insomnia, changes in eating habits, shock and disbelief as victims' responses to violence. Similar reactions are also described in studies of sexually abused children (Kelly, 1986), prisoners of war (Romero, 1985), and death of the institutionalized elderly (Langer & Rodin, 1976).

Janoff-Bulman and Frieze (1983) concluded from their exploration of reactions to victimization that three assumptions are changed as a result of the victimization. There is a change in the belief of invulnerability, a change in the perception of the world as meaningful, and a review of the self as a positive, effective individual. Victimization taxes an individual's assumptions about their experience and their resources to deal with their experience.

Similarities exist between passive reactions to victimization and those found in laboratory studies on the effects of uncontrollable aversive events. Peterson and Seligman (1983) suggest that important parallels exist between learned helplessness and responses to victimization. In both situations there is an uncontrollable aversive event

followed by a generalized belief about future uncontrollability of the aversive event.

Several reviews of the voluminous learned helplessness literature are available (Garber & Seligman, 1980; Miller & Norman, 1979; Seligman, 1975; Sweeney, Anderson, & Bailey, 1986). The original theory of learned helplessness and the reformulated theories are both controversial. The reviews identified summarize the issues involved in the controversy.

Reactions to victimization can be determined by causal interpretation of the event. According to the Reformulated Helplessness Theory, individuals have characteristic ways of explaining bad events. People are consistent in the way they make internal, stable, and global attributions for bad events (Peterson, et al., 1982). If the attribution style is internal, stable and global their reaction to bad events will include loss of self-esteem and chronic general deficits in affect and motivation.

Causal attributions may account for differing reactions to victimization (Peterson & Seligman, 1983). Passive responses may occur when the person makes stable and global causal interpretations of events. Active responses may result from unstable, and specific attributions. Miller and Porter (1983) caution that how a self-blaming victim feels about the internal factor they blame may be as important as its formal properties in determining how the individual copes. Janoff-Bulman (1979) maintains that self-blame directed at one's behavior is less debilitating than self-

blame directed at one's character. Peterson, Schwartz, and Seligman (1981) support this position with respect to patients with depression.

Battered women appear to experience the violence directed toward them as a confusing situation. They generally do not perceive the assault as a situation requiring them to take actions to ensure their safety. Women often remain in violent relationships experiencing escalating physical abuse for years (Pagelow, 1981). Continuity of the relationship becomes the prime objective for the woman when marital conflict occurs in an intimate relationship.

Various strategies of negotiation and bargaining are used to resolve conflicts without dissolving relationships. For successful resolution of marital conflicts to occur, role modification or role induction often occurs. Role modification involves adaptations by both partners. Role induction involves one person agreeing, submitting, going along or being convinced in some manner. Role induction seems applicable to conflict resolution in marital violence since conflict resolution is one-sided. The wife accommodates the husband's abuse behavior (Goldner, 1991).

Rather than seeking help or escaping from their attacker, battered women may rationalize the violent behavior of their partner. This does not mean that the violence is viewed as acceptable but that the women accommodate the

situation by developing cognitive rationalizations and behavioral survival skills to maintain the marital union.

Following interviews with 120 battered women and conversations with shelter staff members, Ferraro and Johnson (1983) identified common reasons given by women for returning to a battering relationship. The rationalizations given by the women appear to be an attempt to neutralize the violence they experience making it appear normal, acceptable, or understandable. Their responses are similar to those offenders offer to explain deviant behaviors. The forms of rationalization identified by Ferraro and Johnson include: the appeal to a salvation ethic, the denial of the injury, the denial of the victimizer, the denial of the victimization, the denial of options, and the appeal to higher loyalties.

This process of rationalization may serve to reinforce victimization, limitations in problem-solving and ineffective coping strategies observed among battered women. Battered women will actively seek an alternative action when rationalized violence is seen as unjustified physical assault (Ferraro & Johnson, 1983).

Current research also suggests that battered women may possess a problem-solving skill deficit (cognitive deficit) limiting their ability to prevent and deal with battering incidents (Campbell, 1986a; Clearhout, Elder, & Janes, 1982; Finn, 1985). Battered women experience stress from multiple

sources but are deficient in coping skills and show limited problem-solving strategies.

Clearhout, Elder, and Janes (1982) interviewed 14 battered and 20 non-battered women to determine their ability to develop as many alternatives as they could to a variety of problem situations. Nonbattered women generated significantly more total alternatives and affective strategies than the battered women. The battered women demonstrated a tendency to suggest avoidance and dependent responses.

Finn (1985) studied the coping skills of 56 women seeking assistance in a shelter. The stressors involved included: money, work, children, relatives, physical illness, jealousy, sexual relations, deciding who is boss, settling arguments, and alcohol or drug use. These stressors are commonly reported to be associated with spouse abuse. Finn reports that the battered women's responses reflected an underutilization of active problem-solving behaviors and the more frequent use of passive strategies when dealing with problems. Battered women reporting were less likely to seek social or spiritual support. The coping strategies used by these women were more often those least likely to alter circumstances and the most likely to result in increased stress through the lack of problem resolution.

This picture of abused women's limited problem-solving strategies and passive coping strategies is consistent with the learned helplessness framework that could suggest a

reactive rather than a proactive nature of battered women's responses to abuse.

A limited number of studies have revealed the dilemma of disengaging from a violent relationship (Hilberman, 1980; Landenburger, 1987; Malloy, 1986; Walker, 1984; Wood, 1987). These studies attempt to address the social and cultural expectations of women and their position within the family. Modern socialization of women still stresses the value associated with being a good wife and mother at the expense of personal achievement for the woman (Ferraro & Johnson, 1983; Yllo & Bogard, 1988). Male-female relationships exist to meet human needs for love and intimacy. Much emotion becomes invested in marriage because of the high value placed upon it. Women who marry adopt the roles of wife and mother as primary identities and are strongly motivated to succeed in those roles. Women are dependent on husbands as sources of self-esteem, emotional support, and continuity as well as practical financial support. The positions of women in today's society, as well as current economic conditions, create a context where it is difficult for women to reject the authority of men and develop lives independent and free of marital violence.

Learned Helplessness and Wife Abuse

Attribution, perceived control, and cognitive deficits are influential concepts in the phenomenon of repetitive abuse in an intimate relationship. Recent studies attempting to address the limitations of earlier investigations of wife

abuse have attempted to answer the question of why women return to, or remain in, abusive relationships using attributions and psychological states as possible factors. These studies introduced the new dimension to the study of wife abuse: personal perceptions regarding abuse. The studies used both quantitative and qualitative research approaches.

An initial study attempting to study attribution among battered women was conducted by Frieze (1979). Frieze used attribution theory to attempt to explain the tendency to view battering as the woman's fault, as evidence of the societal tendency to "blame the victim." Frieze proposed that women blamed themselves for the abuse as a way to gain control over their lives. Women feel that the abuse was their fault so doing things differently or getting help to change themselves could prevent future abuse.

Shields and Hanneke (1983) conducted a study investigating attributions made by individuals in violent relationships. Their perspective significantly differed from Frieze (1979). They investigated attributions made by women of their partner's abusive behavior providing no insight into the woman's attributions regarding violent actions. However, the data demonstrated a tendency for wives of violent husbands to see the men's violence as caused by factors internal to him, such as anger, personality, or intoxication. The wives in the study were more likely to see internal rather than external factors as the cause of the abuse. The

92 women participating in the study were divorced or separated as well as being victim over an extended period of time. Women still involved with violent men might be less likely to attribute the man's violence to internal causes if she is attempting to maintain a positive image of the man and maintain the relationship (Shields & Hanneke, 1983).

The initial study identifying the use of a specific theoretical framework to study wife battering was the creative study conducted by Walker from 1978 through 1981. The purpose of the study was to investigate domestic violence from the woman's perspective. The study involving 403 self-identified battered women uncovered key psychological and sociological factors constituting what has become known as the "battered woman syndrome." The study tested two specific theories, learned helplessness theory and a behavioral cycle of violence theory. The theories were used to explain the characteristics frequently observed in battered women: low self-esteem, traditional attitudes about women, apathy, and depression. Standardized measurement scales, as well as measurement scales developed specifically for the study, were used in this study.

Walker concluded from her analysis of data that experiences in childhood and those from living in a violent relationship created conditions for learned helplessness that interfere with the woman's ability to stop violence directed toward her once it is initiated. Women in the study reported decreased motivation to control the violence, and decreased

expectations of controllability of battering. Repeated battering decreases the battered woman's motivation to respond and she becomes passive. There is a change in her perception of her ability to cause an effective response to the violence. The woman generalizes her helplessness and her ability to generate alternative actions diminishes. There is an emotional response prone to depression, anxiety, and a decrease in self-esteem (Walker, 1984). Like other trauma victims, survival becomes the focus. The danger from repeated violence reoccurs, and cognition, behavior and decision-making become regulated by the need to reduce the violent threat. Responses directed toward timing the violent event, directing the focus of the violence, or controlling the form of the violence serve to reduce the violent threat.

Walker (1979) identified a cyclic nature to wife abuse. From interviews with battered women she developed the cycle theory of violence. This cycle is important for developing an understanding for how battered women learn helplessness behavior and why they do not attempt to escape.

The cycle of violence as described by Walker (1979) has three distinct phases, which vary in both time and intensity for and between couples. Phase One is the tension-building phase. During this time minor battering incidents occur accompanied by a gradual escalation of tension. The woman engages in coping behaviors aimed at keeping the abuser and the environment calm. General anger reduction techniques are used (Walker, 1984, p. 95).

Tension continues to build and the woman's efforts to avoid a violent event prove to be ineffective. Exhausted from exposure to constant stress the woman begins to withdraw from the abuser as he moves more oppressively toward her. This increases his anger. An acute battering incident becomes inevitable and the second phase begins. The uncontrollable display of violence to relieve the tension built up in Phase One characterizes Phase Two. Injuries usually occur during this phase, and police intervention occurs at this stage, if it occurs. Phase Two ends when the violence actually ceases. This violent phase can extend from a few hours to a week. The violent episode facilitates a sharp reduction in tension that is reinforcing to both abuser and victim. Walker observed that violence is often successful because it works (Walker, 1984, p. 96) to reduce the tension.

Loving contrition characterizes Phase Three. The abuser apologizes profusely, demonstrates kindness and remorse, and often showers the woman with gifts and promises. The woman remembers the early stages of the relationship and focuses on its positive aspects. The third phase of the cycle provides a strong positive reinforcement for remaining in the relationship.

As the violent relationship continues over time there is an altering of the cycle of violence. Phases One and Three become shorter as Phase Two is prolonged. This exposes the woman to more frequent intense physical and psychological violence with a shorter tension-building and recovery period.

The repetitive exposure to an event she ultimately can not control sets the context and reinforcement for learned helplessness behaviors.

Following the initial investigation by Walker (1984) several researchers attempted to explore battered women's perceptions of themselves. These researchers were interested in the battered woman's ability to influence a violent relationship, the perceived cause of physical violence, and variables influencing a woman's decision to return to a battering relationship.

Malloy (1986) combined sociological and social learning theory to study the difference among 127 women who returned to abusive partners after leaving a shelter for battered women and those who did not return to their previous partners. The study explored the influence on decision-making of common demographic variables, self-efficacy, cognitive strategies, social support, social desirability and marital adjustment. Prange (1985) used reactance theory and the learned helplessness model to examine pertinent factors in the decision-making process on the intent of 60 battered women leaving a shelter to return to an abuse relationship. Campbell (1986a) used a grief model and the learned helplessness model to explain battered women's responses. Johnson (1987) combined exchange theory and learned helplessness theory to determine factors that might have a significant impact on decision-making processes of 426 battered women in shelters.

The reviewed studies, using a theoretical framework of learned helplessness to explain battered women's decisions to return to or to leave an abusive relationship, do demonstrate that several common factors play a role in influencing a final decision. Women who eventually return to the abusive situation report less self-efficacy and a greater feeling of self blame (Malloy, 1986; Prange, 1985). They report less marital adjustment (Malloy, 1986) and less economic self-sufficiency (Johnson, 1987; Landenburger, 1987; Malloy, 1986) than those women who use social agencies for financial and emotional support resources (Johnson, 1987). Fewer coping and appraisal strategies were perceived as being available to women returning to battering relationships (Campbell, 1986a; Landenburger, 1987; Malloy, 1986; Wood, 1987). Battered women returning to violent relationships also reported greater feelings of depression (Campbell, 1986a; Landenburger, 1987; Wood, 1987).

Women who were able to make the decision to leave battering situations reported to be more self-confident, that they were able to function without the abusive partner, that they felt comfortable living alone, and that they perceived keeping busy as important factors in their ability to remain out of the battering situation (Malloy, 1986). These women, following many episodes of severe battering, seemed to sense the incongruity and cognitive distortion between their perceived and actual ability to control the battering behavior of their abusive male partner (Campbell, 1986a;

Landenburger, 1987; Prange, 1985; Wood, 1987). Johnson (1987) reports that the women in her population who permanently left a battering relationship had a greater support system and stronger beliefs that they possessed more control over the abusive behavior.

Attribution of the cause of violence was a significant variable that discriminated between women who returned to a battering relationship and those who did not. The significant variable appeared to be the ability not to blame themselves for the violence (Johnson, 1987; Malloy, 1986; Prange, 1985; Wood, 1987). The more internal the attributions made by the woman the more likely she was to return to the abusive situation. In Prange's (1985) study, exploring women's intent to return to battering situations after being in a shelter, an internal attribution dimension was positively correlated with the intentions to return to the relationship. Prange also demonstrated a negative correlation existed between general locus of control and intent to leave a battering relationship. A woman with an external locus of control outside of the abusive relationship was more likely to return to the abusive relationship.

Summary

In summary, the attributions women make about the cause and continuation of battering have been demonstrated to be an aspect of the psychological response to battering (Campbell, 1986a). An important contribution of learned helplessness theory has been to accentuate the psychological factors

influencing women's decision-making regarding remaining in abusive relationships and their perceptions of control of violence. It is important to identify the role of social and economic factors influencing the battered woman's experience and also identify the psychological factors that may exist that prevent women from being aware of and using available resources. Low levels of self-esteem and incongruent perceptions of violence control influence the battered woman's decision to return to the violent relationship. Self-doubt and the inability of the woman to control aversive events that debilitate her figure prominently in decision-making and behavior.

In conclusion, marital violence has been, and continues to be a significant social problem. Wife abuse itself has been a victim of selective inattention by theorists and researchers. Although violence against women is now publicly acknowledged, the battering experience remains poorly understood. The focus of research to identify the incidence and variables of battering have focused upon the violent act of battering rather than an exploration of the context in which violent actions occur, their meaning for either the victim or the offender or the context in which violent acts within the family occurs.

There have been considerable numbers of descriptive studies revealing the frequency, demographic and interpersonal dynamics of spousal abuse. Until recently few studies have examined battered women's reactions, responses,

perceptions or expectations regarding violence directed toward them. Previous studies have been independent, isolated studies. Also absent from the available literature is an understanding of the behavioral responses, decision-making, and problem-solving strategies used by battered women. From a limited representation of the general population of abused wives, a sketchy picture has developed suggesting common characteristics among these women. However, little has been accomplished in generating knowledge or understanding of the complex dynamics of wife abuse. There have been few studies using a specific relevant theoretical framework with testable hypotheses. What does evolve from a review of current literature related to wife abuse is that wife battering is multivariate and multideterminate in nature (Prange, 1985).

The knowledge base regarding domestic violence, spousal abuse in particular, lacks the information useful for stimulating treatment approaches or prevention programs. Research findings have done little to present a clear picture of the phenomenon with cogent results (Follingstad, 1990).

Chapter Three

Method

Design

The study used a causal modeling design (Asher, 1983) to explore the relationships among the exogenous variable of battering and the endogenous variables of attribution style, self-esteem, helplessness, and perception of control of violence. Figure 1 and 2 depict the proposed path analytic model and accompanying measures.

Structural Equations

The structural equations for the over-identified model are:

Battering

$$X_1 = e_1$$

Attribution style

$$X_2 = P_{21}X_1 + e_2$$

Self-esteem

$$X_3 = P_{31}X_1 + P_{32}X_2 + e_3$$

Helplessness

$$X_4 = P_{41}X_1 + P_{42}X_2 + P_{43}X_3 + e_4$$

Perceived controllability of violence

$$X_5 = P_{51}X_1 + P_{52}X_2 + P_{53}X_3 + P_{54}X_4 + e_5$$

Subjects

Potential subjects for the study were recruited using a variety of techniques. Recruits were sought through identified battered women's shelters located throughout Los Angeles County, California, and through advertisements placed in the Los Angeles Times and local community newspapers. Flyers were distributed through church council bulletins. Notifications were also sent to local women's groups and clubs, university and junior college newspapers and women's resource centers.

Los Angeles County is a densely populated community with relatively high abuse arrest rates. In Los Angeles County, from the year 1989 to 1990, arrests for spousal abuse (273.5 police code for abuse arrests) rose from 7,659 to 16,430. Male arrests for spousal abuse rose during that time period from 7,077 to 15,362 (California Department of Justice, Bureau of Criminal Statistics, 1991).

Recruitment efforts began in January 1991 and continued through August 1991 when a total of 100 subjects had been recruited. A total sample of 100 subjects was chosen for the study to produce a power of 0.84 based on an L (effect size estimate) of .12, a u (number of independent variables) of 4, and a probability level of 0.05.

Inclusion in the sample required: involvement in a physically violent relationship with an intimate partner whether engaged, married, divorced, or co-habitation; having experienced at least one violent episode in the past

eighteen months; and the ability to speak, read, and understand English. The criteria for physical violence was any form of coercive physical act, with or without resulting injury, perceived by the woman as violent. All women volunteering to participate in the study who met the criteria for inclusion were admitted to the study.

Subjects were 100 self-identified battered women between the ages of 18 to 65 years of age (mean 38.5). Sixty-four percent of the sample was between 18-40 years of age and 36% between 41-65 years of age. Three percent of the sample had not graduated from high school, 16% reported high school graduation as their highest level of education, 37% had completed some college work, 26% held associate degrees, 11% baccalaureate degrees and 7% masters degrees. The majority of the sample were Caucasian (66%) with Asians 1%, African-Americans 26%, and Latino 6% of the sample.

A religious affiliation was identified by 96% of the subjects. The majority identified themselves as Protestant, 38%. The other denomination were: Catholic 11% and Jewish 8%. Five women identified themselves as affiliated with religious denomination not listed. Three women indicated no religious affiliation.

Six percent of the sample were single, 58% were married, 13% separated, 18%, divorced 4% widowed, and 1% reported a co-habiting type of relationship. Husbands or ex-husband were the abusive partner in 73% of the relationships, lovers or ex-lovers in 20% of the cases and

someone else in 7% of the cases. Length of time in the relationship ranged from one year to 49 years. Seventy-five of the women in the study reported that they currently had some form of contact with their abuser. The degree of frequency of the abusive episodes experienced by the women varied from a one time event (2%) to occurring more than once a week (9%). Twenty-seven percent of the women were childless and the average number of children involved was 1.79.

The sample represents essentially an upper-lower class socioeconomic level with 39% of the women identifying a current family income between \$31,000 and \$40,000. Seventy percent of the women had some form of employment outside of the home.

Sixty-eight women reported that they had been involved in only one abusive relationship. Thirty-two women reported that they had been in multiple abusive relationships. The current onset of battering was associated with a specific event for 28% of the sample. Sixty-eight percent of the sample indicated that the frequency of the battering had increased over time, and 83% reported an increase in the severity of the abuse over time. Fifty-three percent of the women reported having left the abusive relationship at some point.

A significant number of the subjects had experienced domestic violence as children (52%) and 26% reported to having experienced abuse as a child. Specific information

regarding the type of prior abuse were not obtained.

A small portion of the sample (18%) reported having been treated for depression in the past. Three percent of the sample were currently on antidepressant medication while 25% of the sample reported current prescription medication use varying from antibiotics to birth control pills (Appendix A).

Assessment Measures

The measures utilized will be discussed in the order of the hypothesized path analytic model, as diagrammed in Figure 2.

Battering. Battering was measured using the Index of Spouse Abuse (ISA) (Hudson & McIntoch , 1981). This is a 30 item scale designed to measure the severity or magnitude of two dimensions of violence, physical (P) and non-physical (NP). The ISA contains two clinical cutting scores, one for each subscale. ISA-P scores above 10 indicate serious physical abuse and ISA-NP scores above 25 indicate serious nonphysical violence. The ISA is a five-point Likert scale with scoring anchors of 1 (never) to 5 (very frequently). The two subscales are scored separately with each item weighted according to seriousness. Non-answered items are discarded. Item scores are multiplied by item weight and summed, all item weights are added to obtain a possible minimum score. The minimum score is then subtracted from the sum of other scores, multiplied by 100 and divided by the minimum score times four to obtain a final score. The

range of scoring is 0 to 100 for each subscale. The ISA has reported internal consistency Cronbach's alpha coefficients of 0.90 to 0.94 for the ISA-P and 0.91 to 0.97 for the ISA-NP. S.E.M. were 2.68 to 4.67 for the ISA-P and 3.27 to 3.33 for the ISA-NP. The ISA has reported group validity, accurately discriminating between known abused women and non abused women. There is reported construct validity with high correlation with depression, low self-esteem, sexual satisfaction and marital relationship problems (Hudson, 1982).

Attribution style. Attribution style was measured using the Attribution Style Questionnaire (ASQ) (Peterson, et al., 1982). The AQS is a self-report measure of "explanatory style". This is a 60-item scale with three dimensions: locus (internal/external), stability (stable/unstable), and globality (global/specific). Twelve hypothetical events are described, 6 good events and 6 bad events. Subjects are asked to identify one major cause for the event and answer a seven--point Likert scale rating of the cause of the event. Three sets of anchors are used: locus 1 (totally due to other people or circumstances) to 7 (totally due to me); stability 1 (will never again be present) to 7 (will always be present); globality 1 (influences just this particular situation) to 7 (influences all situations in my life).

Composite scores are established by summing the items and dividing the sum by the number of items in the

composite. A summative score can be generated for each of the dimensions and a composite score that sums across the dimensions. Each individual dimension ranges from 1 to 7, composite scores range from 3 to 21 for Composite Positive and Composite Negative and from -18 to + 18 for Composite Positive/Negative. Internal consistency was established using Cronbach's coefficient alpha. Modest reliabilities of 0.44 to 0.69 were reported for the locus, stability and globality scales and moderate reliabilities of the composite scores, 0.75 for good events and 0.72 for bad events. Five week test-retest correlations range from .58 to .70. The ASQ has been reported to demonstrate construct, criterion and content validity, specific values not provided (Peterson, et al., 1982).

Self-esteem. Self-esteem estimate was measured using the Index of Self- esteem (ISE) developed by Hudson (1982). This is a 25-item, one-dimensional, five-point Likert scale with scoring anchors of 1 (rarely or none of the time) to 5 (most of the time) designed to measure degree, severity, and magnitude of self-esteem problems. The cutting score is 30 (± 5) with scores over 30 indicating respondents with clinically significant problems with self-esteem. The ISE is scored by first reversing scoring items 3, 4-7, 14, 15, 18 ,21, 23, 25, summing these and the other items scores and subtracting 25. A range of 0 to 100 is produced. The ISE has an internal consistency rating of Cronbach's coefficient alpha of .93. A two-hour test-retest correlation of 0.92

reflects test stability. Construct validity has been reported (Hudson, 1982).

Helplessness. Helplessness was measured using the Beck Depression Inventory (BDI) (Beck, 1967) and The Learned Helplessness Scale (LHS) (Quinless & McDermott-Nelson, 1988). The Beck Depression Inventory is a 21-item Likert scale assessing cognitive, affective, motivational, vegetative, and psychomotor components of depression. On a 0 to 3 rating scale respondents indicate severity of depressive symptoms. Item scores are summed producing a range 0 to 63, the higher the score the more severe the degree of depression. Split half reliability ranges from 0.78 to 0.93. Test-retest reliabilities reported were 0.48 for psychiatric patients after three weeks and 0.74 for undergraduate students after three months. The BDI has been reported to have high correlation with other depressive measures with construct and content validity demonstrated in the ability of the instrument to distinguish among groups and agreement between clinical psychiatric evaluations of depression with the amount of depression shown by the instrument (Beck, 1967).

The Learned Helplessness Scale (LHS) is a 20-item four-point Likert scale with scoring anchors of 1 (strongly disagree) to 4 (strongly agree). The range of possible scores is 20 to 80. The higher the score on the LHS the higher the individual's degree of learned helplessness. Internal consistency is demonstrated with a Cronbach's alpha

co-efficient 0.85. Concurrent, criterion-related validity were demonstrated with Pearson product moment correlation coefficients between the LHS and the Hopelessness Scale (HS) (Beck, 1974) was 0.35 and the Self-Esteem Scale (SES) (Rosenberg, 1965) was -0.71 (Quinless & McDermott Nelson, 1988). Content and face validity were established through independent expert review.

Perceived controllability of violence. Perception of control was measured using the Chin Perceived Control in Interpersonal Conflicts Scale (CPCICS) (Chin, 1991) is a 60-item scale measuring four dimensions of perceived control in interpersonal conflicts: internal control, external control, behavioral control, and cognitive control (Appendix B). The scale is a 6-point Likert scale with scoring anchors 1 (strongly disagree) to 6 (strongly agree). Each subscale has a summative score with a scale range from 15 to 90. The score on each subscale reflects the individual's perception of control. The subscales demonstrate high degrees of internal consistency with Cronbach alpha coefficients reported: internal control 0.86, external control 0.89, behavioral control 0.80, and cognitive control 0.91. Modest correlation has been demonstrated between the subscales of the Levinson Internality, Externality, Powerful Others locus of control scale (Levinson, 1974). No significant correlation was demonstrated between the CPCICS and the Marlowe-Crowne Social Desirability Scale (Pearson product moment correlation coefficient = 0.20).

Demographic profile. The demographic profile developed for this study included the following items: ethnicity, type of relationship with batterer, length of time in the relationship, current employment status, educational background, religious background, number and ages of children, observations of parental battering, history of violence during childhood, date of most recent battering episode, history of terminating violent relationship both temporary and permanent, length of time removed from violent partner, history of treatment for depression, and current medication history (Appendix H).

Procedures

Permission to conduct the study was obtained from the Committee On Protection of Human Subjects at the University of San Diego, San Diego California (Appendix I).

Potential subjects responding to advertisements, announcements or distributed flyers contacted the researcher by telephone. The researcher then met individually, or in a group setting, with each potential subject to explain the study and its purpose, answer questions, to obtain informed consent, and to collect data. Testing sessions with potential subjects were held in a public area mutually agreed upon by both the researcher and the potential subject. Measures were taken to assure privacy during the testing sessions. All testing sessions occurred during daylight hours.

The following issues were addressed in the consent form: the voluntary nature of participation, the participant's ability to terminate the study any time without negative consequences to the subject, the right not to answer any questions that the subject wishes to not answer, anonymity, confidentiality, privacy, procedures, purpose, time and energy expenditure, discomfort, risk, benefits, how information obtained will be handled and disseminated and follow-up (Appendix E).

Data collection was a one time interaction between the researcher and the subject, requiring approximately 90 minutes for each individual testing session. Physical energy expenditure was considered minimal by the subjects. There were no reports of psychic energy expenditure or feelings of stress or guilt expressed by subjects. This possibility had been discussed with each subject prior to obtaining informed consent. A clinical psychologist was available for referral if any woman experienced stress or emotional distress as a result of participating in the study.

At the conclusion of the testing sessions 43 woman reported that their participation in the study provided an avenue to ventilate their feelings and to share their experience with another person. It also provided an opportunity for service referrals and follow-up outreach for women who had dropped out of support groups.

Measurement instruments and the demographic profile were administered in a prepared booklet form in English. A pilot study was conducted to identify any difficulties with the administration of included measurements and the time required to complete the instrument booklet. No problems were identified and the completion time average was 45 minutes. Potential subjects were assured that no follow-up contact would be attempted should they not attend a scheduled appointment. Following completion of the data collection each subject was given a telephone number should she wish further contact with the researcher. A listings of shelters, hotline numbers, and suicide/crisis hotline numbers current at that time throughout Los Angeles County were given to each subject (Appendix K).

Data Analysis Techniques

Description of statistical tests. Data analysis included both descriptive and correlational techniques. All statistical analysis was accomplishment on the computer at the University of San Diego using the Statistical Package for the Social Sciences (SPSS) Release 4.0 for DECstation, running on a DECsystem 5810 under ULTRIX 4.1. Descriptive statistics and scattergrams were run to determine normal distribution and linearity of data for all variables. Pearson product-moment correlations of all variables, and residual scatterplots of endogenous variables and error terms were analyzed.

Following data description, data reduction was accomplished with the Chin Perception of Control in Interpersonal Conflict Scale (CPCICS) utilizing the process approach of factor analysis suggested by Nunnally (1978, pp.357-367). After checking item commonalities the principal components analysis with varimax rotation method was selected for analysis. The principal-components method of condensation statistically optimizes aspects of data that have actually been obtained from a sample of subjects (Nunnally, 1978, p. 357).

Statistical analysis continued and was performed based upon a belief that the assumptions underlying regression had been met. Assumptions regarding regression include: that variables are linearly related, that variables are measured at the interval level, that variables are independent of each other, that there is normality, homoscedasticity, and that no correlation exists between independent variables and the residual of another independent variable (Waltz & Bausell, 1981 p.279). Since the proposed model is a recursive model it was also assumed that the variables were additive and causal and that there was a one-way causal flow in the system (Budd & McKeehan, 1986, p.122).

Steps of data analysis followed those suggested by Munro and Sexton (1984, pp. 93-96). After checking internal consistency and the absence of multicollinearity through bivariate correlation coefficients, multiple regression analysis was completed. Regression began with the first time

ordered independent variable (battering) and ended with the outcome variable (perceived control of violence). Regression analysis results were then examined to determine the Beta weights (path coefficients), level of significance, and the amount of variability accounted for by each variable in the equations. Beta weights of 0.10 with probability levels of at least 0.05 were considered salient (Waltz & Bausell, 1981, pp 292-293). The coefficient of determination (R^2 or the adjusted R^2), determined if significantly different the proportion of variance of each criterion variable explained by predictor variables. This was examined for variables entered into each equation. The multiple regression coefficients determined the strength of the relationship between the variance of predictors and the criterion variables. Beta weights, reaching at least 0.05 probability level, were placed on the proposed model, and a decomposition table was constructed to determine each prior variable's total effect (direct and indirect) on each subsequent variable.

Interpretation of key elements. Based upon the above analyses, the study hypotheses were examined, and either accepted or rejected. Finally, the simplified causal model was reconstructed as necessary, and compared to the hypothesized model as suggested by Budd and McKeehan (1986, p.129) and Stember (1986, pp.114-117). The influence of each of the variables were then considered, contrasting the

current findings from previous research and determining possible implications for future research and practice.

Limitations. Certain elements of the design of this study threaten its internal and external validity as discussed by Krathwohl (1985). Threats to internal validity stem from questions regarding the study's translation fidelity and rival explanations. Since the variables in the study are not, because of their nature, directly observable the measurements used in the study must represent the conceptual definitions of the concepts and constructs. The fact that two of the instruments have only recently been developed and have had limited use could constitute an important threat. However, the set of instruments used as empirical indicators for the study are considered by the researcher to be genuine instances of what is purported to be demonstrated by the study (Krathwohl, 1985, p. 89).

Threats to the external validity in this study arise from similar issues as those raised in the discussion of threats to internal validity. They include: translation generality and restrictive explanation (Krathwohl, 1985). There is an added threat to the external validity; replication of the study results. Due to the nature of the phenomenon under study, changing social issues and policies, and the private nature of the subject, it may not be possible to replicate the study findings. This fact makes the study of the phenomenon challenging and interesting. The study is further delimited by the use of only English

language psychometric measurements. While these threats are thought to be possible the explanation credibility demonstrated through strong explanation power (.84), and the ground breaking nature of the study counter-balance these possible threats.

Chapter Four

Results

Data Reduction

Data reduction was performed using three statistical techniques. Those techniques included: factor analysis, reliability testing, and examination of bivariate correlations to determine multi-dimensionality.

Factor analysis is a broad category of approaches used to conceptualize groupings of variables, called clusterings. It is also a collection of procedures for identifying which variables belonging in groupings (Nunnally, 1978, p. 327). The sophisticated empirical data reduction tool clusters individual items into combinations called factors each of which is independent of all other identified factors. (Waltz & Bausell, 1981, p. 299-301). Factor analysis is performed to reduce data, and define constructs. The technique also provides the opportunity to establish the factorial composition of psychometric instruments (Nunnally, 1978, p.112).

A salient loading of greater than 0.35 was pre-established for retention of an item within a factor. After examining the univariate and bivariate relationships, varimax rotation procedures were used to clarify the factors. Factor

loadings were then examined and each factor solution was inspected for its simple structure and meaningfulness (Dixon, 1986, p.275).

Reliability testing is essential for determining the degree of confidence that one can place in psychometric measurements. The reliability of a measuring device refers to the consistency of responses used to measure a concepts (Strickland & Waltz, 1986, p.85). Reliability estimation on all the measures used in the study include examination for: mean inter-item correlation (> 0.25), item-total correlation (≥ 0.35) and Cronbach's alpha coefficient ($\geq .60$) to establish parsimonious reliable factors.

Correlational techniques are used to explore the existence and nature of relationships among concepts (Munro, 1986, p. 63). The Pearson Product Moment Correlation Procedure (r) was the method used in this study to quantify relationships among the study variables. The correlations among subscales of the CPCICS were examined using this technique. A correlation matrix of all variables to be entered into multiple regression analysis was also examined for multicollinearity ($r > .60 - .70$)

Factor Analysis of the CPCICS

Factor analysis was performed to reduce data, and define constructs contained in the newly developed measure Chin Perceived Control in Interpersonal Conflict Scale (CPCICS). The technique was used to confirm appropriate assignment of items into subscales, and to establish factorial composition

of the psychometric instrument (Dixon, 1986, p. 268; Nunnally, 1978, p.112).

Several criteria were used to analyze the results obtained from the statistical procedures. The upper boundary to the possible number of factors was set using an eigenvalue equal to, or greater than, one. Nunnally (1987, p. 358) suggested that to be considered reliable, an eigenvalue should be 1 because that is the variance of standardized variables. The criterion selected for factor loadings was pre-established at a level greater than .35. The final criterion used for analysis was interpretability. An item was not retained in a factor if it did not demonstrate conceptual logic.

Following data description, data reduction was accomplished with the Chin Perception of Control in Interpersonal Conflict Scale (CPCICS) using the approach to factor analysis suggested by Dixon (1986, p.275). After checking item commonalties, the principal components factor analysis method of condensation was selected for analysis. The principal-components method of condensation statistically optimizes aspects of data actually obtained from a sample of subjects (Nunnally, 1978, p. 357). The next step was to rotate the factors using the varimax rotational approach (Nunnally, 1978, p. 384). The factor analysis of the CPCICS yielded four factors: internal controllability, external controllability, cognitive controllability, and behavioral controllability.

An examination of the internal subscale revealed that 11 of the original 15 items met the inclusion criteria and were retained in the scale. Items 9, 44, 48 and 52 were deleted from further analysis relative to their non-salient factor loading ($< .35$). Upon examination items 9, 44, 48, and 52 could be interpreted as representing beliefs about ultimate control over conflict and a unilateral nature for dispute resolution that does not exist. The remaining items in Factor 1 tapped content reflected an internalized perception of controllability, and the original name Internal Controllability was retained.

Of the 15 original items in the external subscale, 12 items met the criterion and were retained. Items 28, 37 and 46 were deleted from further analysis relative to their non-salient factor loading ($< .35$). Upon examination, the deleted items appeared to address the presence of some personal characteristic that influences conflict control. The retained items in Factor 2 tapped content reflecting an externalized perception of controllability, and the original name External Controllability was retained.

In the cognitive subscale, 13 of the original items were retained. Item 49 was excluded relative to its non-salient factor loading ($< .35$). Item 49 addressed pointing out obstacles contributing to conflicts, and may have been interpreted differently from the other items contained in the subscale. Items retained in Factor 3 tapped content

reflecting the domain of cognition and the original name Cognitive Controllability was retained.

Of the original 15 item in the behavioral subscale, seven items met the criterion and were retained. Items 1, 6, 27, 31, 34, 35, 55 and 59 were excluded from further analysis relative to non-salient factor loadings ($< .35$). These deleted items addressed: being assertive, which might not have been interpreted as behavioral in nature; the individual taking sides with stronger persons; creating a scene in public; and taking action before the other person involved in the conflict took action. Items retained in Factor 4 tapped content reflecting the behavioral domain and the subscale retained the original name Behavioral Controllability. Table 1 contains factor loadings and item stems for each of the four identified factors.

Reliability Testing of the CPCICS

The four subscales of the CPCICS, Internal Controllability, External Controllability, Behavioral Controllability, and Cognitive Controllability, were subjected to reliability testing. The subscales demonstrated good reliability with mean inter-item correlations ranging from .44 to .59, and Cronbach's alpha coefficients ranging from .85 to .96. Table 2 contains the reliability estimates for all scales.

Table 1

Factor Items, Item Stems, and Factor Loadings CPCICS

Items	Item Stem	Loadings
<u>Factor 1 Internal</u>		
17	I can successfully control most interpersonal conflicts.	.89
39	Gaining control depends upon my own skills and interpersonal ability.	.83
12	I can successfully control the outcomes of most conflicts.	.80
13	I maintain control in conflicts because I'm a strong person.	.75
23	It helps to plan ahead to reduce escalation of conflicts.	.75
50	I am directly responsible for outcomes of a dispute.	.73
11	I can influence the outcome of a conflict because I take advantage of opportunities.	.66
57	Conflict escalation depends upon my own abilities and skills.	.66

(Table Continues)

Factor Items, Item Stems and Factor Loading CPCICS

Items	Item Stems	Loadings
8	I cannot stop escalation of conflicts once they have begun.	.55
36	It helps to plan ahead to avoid conflicts.	.53
26	Outcomes in conflicts depend upon my skills and abilities.	.50
<u>Factor 2, External Control</u>		
43	It does not help to plan ahead since the other person will control outcomes.	.82
47	It does not help to plan ahead because the other person has greater control over situations.	.80
15	I cannot prevent disagreements because the other person usually has more control.	.80

(Table continues)

Table 1 (Continued)

Factor Items, Item Stems and Factor Loading CPCICS

Items	Item Stems	Loadings
24	A person like myself has little chance of protecting myself or interests.	.78
2	No matter how hard I try I can never prevent disagreements from getting worse.	.77
54	I cannot influence the outcomes because of conflicts because person usually is more powerful.	.75
4	A person like myself has little chance of preventing disagreements from getting worse.	.72
30	The outcome of disputes depends upon the desires of others not my actions.	.72
8	No matter how hard I try I can not stop the escalation of disputes once they begin.	.70

(Table continues)

Table 1 (Continued)

Factor Items, Item Stems and Factor Loading CPCICS

Items	Item Stems	Loadings
14	No matter how hard I try I can never influence the outcome of a dispute.	.68
40	I find it difficult to determine whether a conflict is controllable.	.64
<u>Factor 3, Cognitive Control</u>		
16	I can gain control by trying to understand what is going on with the other person.	.90
25	I can control the onset of conflicts by trying to discover what the other person wants.	.87
21	I can influence the onset of a dispute by understanding the other person.	.85

(Table continues)

Table 1 (Continued)

Factor Items, Item Stems and Factor Loading CPCICS

Items	Item Stems	Loadings
33	I can influence the escalation of conflict by trying to understand the other's point of view.	.82
18	I influence outcomes by reasoning with the other person.	.81
32	I control outcome by trying to understand the other person's needs.	.81
38	I control conflicts by pointing out contributing factors.	.80
42	I control outcome by reasoning logically with the other person.	.80
22	I reduce the intensity of conflict by reasoning with the other person.	.78
29	I control disagreements by reasoning with the other person.	.75
56	I control outcome by trying to understand common issues and ideas.	.73
3	I control outcomes by offering alternative actions and solutions to issues causing conflict.	.70

(Table continues)

Table 1 (Continued)

Factor Items, Item Stems and Factor Loading CPCICS

Items	Item Stems	Loadings
53	I avoid most conflicts be reasoning logically with the other person..	.50
<u>Factor 4, Behavioral Control</u>		
20	I keep conflicts form getting worse by storming out of the room.	.82
19	I prevent disputes by withdrawing from the other person.	.81
60	I control outcomes by withdrawing from the other person.	.70
41	I control escalation by withdrawing from the other person.	.67
5	I manage disputes by not walking with the other person.	.62
45	I prevent disagreements by becoming emotional.	.57
10	<u>I can control escalation of disputes by crying.</u>	<u>.51</u>

Table 2

Mean Inter-item and Item Total Correlation and Reliability
Estimates For All Scales

Instrument	Subscale	Mean Inter-item	Item Total	Standardized
		Correlations	Ranges	alphas (Cronbach's)
Index of Spouse Abuse	Physical	.31	.31 - .82	.88
	Non- physical	.35	.33 - .80	.91
Attribution Style Questionnaire	Composite			
	Negative	.09	-.12 - .60	.64
	Composite Positive	.20	.06 - .70	.79
Index of Self-esteem	None	.29	.26 - .83	.91
Index of Helplessness	None	.32	.29 - .79	.90

(Table continues)

Table 2 (continued)

Mean Inter-item and Item Total Correlation and Reliability
Estimates For All Scales

		Mean Inter-item	Item Total	Standardized
Instrument	Subscale	Correlations	Ranges	alphas
(Cronbach's)				
Beck				
Depression				
Inventory	None	.27	.14 - .81	.87
Chin	Internal	.47	.43 - .85	.90
Perception	External	.51	.41 - .76	.92
Conflict	Internal/	.52	.46 - .92	.96
Scale	Cognitive			

Correlation Matrix

A correlation matrix was created to examine the relationships among variables measured in the CPCICS and to determine unidimensionality versus multi-dimensionality. Internal Controllability was negatively correlated with External Controllability (-.72), and positively correlated with Behavioral Controllability (.70) and Cognitive Controllability (.88). External Controllability was negatively correlated with Behavioral Controllability (-.42) and Cognitive Controllability (-.82). Behavioral Controllability was positively correlated with Cognitive Controllability (.65). All correlations were found to be significant at the .01 level of significance. Table 3 depicts these relationships.

Table 3

Correlation Matrix of CPCICS Variables

	Internal Control	External Control	Behavioral Control	Cognitive Control
Internal Control	-	-.72**	.70**	.88**
External Control		-	-.42**	-.82**
Behavioral Control			-	.65**
Cognitive Control				-

** p. < .01

Based upon the examination of the correlation matrix two subscales of controllability were established. These subscales are: the Internal/Cognitive/Behavioral Controllability Scale and the External Controllability Scale.

Psychometric Properties of Other Instruments

All published scales were subjected to reliability testing. The Hudson and McIntoch Index of Spousal Abuse (ISE), the Hudson Index of Self-esteem (ISE), the Beck Depression Inventory (BDI), and the Quinless and McDermott-Nelson Learned Helplessness Scale (LHS) all had a mean inter-item correlation greater than 0.25 and good reliability estimates. Cronbach's alpha coefficients ranged from .64 to .96 (see Table 2).

One dimension of the Seligman Attribution Style Questionnaire (ASQ), the Composite Positive Scale, had a mean inter-item correlation of 0.20 with a reliability estimate of 0.79. However, the second dimension of the scale, the Composite Negative Scale, produced a mean inter-item correlation of only 0.09 with a reliability estimate of 0.64 and was deleted from further analysis (see Table 2).

Testing the Model

The primary statistical analysis in this study was multiple regression. Several assumptions underpin multiple regression analysis: there is a linear relations among variables, variables are measured at the interval level, there is a multivariate normal distribution, variables are

independent of each other, and scores are homoscedastic (Waltz & Bausell, 1981, p. 279).

Before performing multiple regression analysis, a correlation matrix of all variables was constructed to determine whether multicollinearity existed. It was decided a priori that one of the variables with correlation coefficients more than .8 would either be excluded from further analysis or a new composite variable would be formed.

The initial examination of the correlations among the 11 variables demonstrated the existence of a condition of multicollinearity ($r \geq .8$) for five variables. Two new composite variables were created. The two subscale dimensions of the ISA, physical abuse and non-physical abuse ($r = .69$), formed the single variable of battering. Another composite variable was created using three dimensions of the CPCICS, Internal Controllability, Cognitive Controllability, and Behavioral Controllability, forming the variable of Internal/Cognitive/Behavioral Controllability (see Table 3).

After the creation of the composite variables, the correlation matrix was reexamined. The correlation matrix revealed that the highest significant correlation $-.52$ exists between attribution style for positive events and negative self-esteem estimates. Examination of the correlation matrix also indicated that the anticipated correlation between the BDI and the LHS was not evident ($r = .41$). These variables were anticipated to form a composite variable: Helplessness. Because the relationship was not demonstrated, the LHS was

deleted from further analysis. Also, the BDI demonstrated significant correlation with the internal, cognitive, and behavioral controllability outcomes while the LHS correlation with those outcomes were not significant. Following the reexamination of the matrix, five variables remained for regression analysis.

It should be noted that for the composite variable for Battering 4 items (ISA 2, I4, 15, and 20) had inter-item correlations below the criterion ($< .35$). However, relative to the composite scale's inter-item mean correlation of .33 and an alpha coefficient of .94 the items were retained.

The matrix of variables to be entered into multiple regression is depicted in Table 4. The table includes the variables of battering, attribution style for positive events, negative self-esteem estimates, helplessness, and controllability.

Examination of the correlation matrix of the variables indicated that multicollinearity was not a problem since the bivariate correlations between the variables within the model did not exceed the level of $\pm .8$. Examination of the correlation matrix for variables contained within the proposed model reveals battering, as measured by the ISA, to be negatively correlated with the attributions for positive events measured by the ASQ ($r = -.10$), perceptions of control as measured by internal/cognitive control ($r = -.45$), and with

Table 4

Correlation Matrix For Variables Within The Model

	X1	X2	X3	X4	X5a	X5b
Battering (X1)	-	-.10	.19	.51**	-.45**	-.53**
Attribution Style (X2)		-	-.52**	-.35**	-.02	-.03
Self-esteem (X3)			-	.40**	-.05	.02
Helplessness (X4)				-	-.39**	-.34**
Internal/Cognitive Control (X5a)					-	.69**
Behavioral Control (X5b)						-

** P < .01

behavioral control ($r = -.53$) and positively with helplessness ($r = .51$). Attribution for positive events as measured by ASQ is negatively correlated with negative self-esteem estimates as measured by the ISE ($r = -.52$), helplessness as measured by the BDI ($r = -.35$), and perceptions of control as measured by internal/cognitive control ($r = -.02$) and behavioral control ($r = -.03$). Negative self-esteem estimate as measured by the ISE is positively correlated with helplessness as measured by the BDI ($r = .40$), perceptions of control as measured by internal/cognitive Control ($r = -.05$), and behavioral control ($r = .02$). Helplessness negatively correlates with internal/cognitive control ($r = -.39$) and behavioral control ($r = -.34$). The correlation matrix also demonstrated that the required significant relationship does exist among model variables (Budd & McKeehan, 1986, p. 127)

Distribution and Homogeneity

Following confirmation of the absence of multicollinearity, equal distribution and homogeneity of the data were confirmed before checking multiple regression analysis assumptions through residual analysis. Scatterplots were obtained to confirm evidence of equal variance and no departure from linearity (Munro, 1986, pp.66-67). To demonstrate variance, the scatter of points were equal and random about the zero line. Scatter points did not curve across the zero line indicating linearity and independence. A histogram was examined to confirm normal distribution of

the residuals and a zero mean (Verran & Ferketich, 1987, pp. 127-130).

The assumptions of multiple regression were met. Variables were measured at the interval level. Multicollinearity was not demonstrated among the study variables. Equal distribution and homogeneity were confirmed.

Path Analysis

Path analysis is a method for exploring the direct, indirect, or spurious effects of variables hypothesized as causes of variables treated as effects (Budd & McKeehan, 1986, p. 127). Path analysis leads to a determination of the independent variables effects on a dependent variable. Path analysis is not a method of discovering cause. It is a method used to explore models developed by researchers based on knowledge and theoretical considerations (Kerlinger & Pedhazur, 1973, p. 305).

Path analysis was used to test the research hypotheses. Criteria for inclusion for each variable into the model included a beta weight of 0.10, with a significance level of at least 0.05 (Budd & McKeehan, 1986, p. 130). F level for entry was specified in this analysis as 2.

A stepwise solution was used for regression analysis (Kerlinger & Pedhazur, 1973, p. 290). In stepwise solutions, multiple tests are performed to determine the contribution of each variable already in the equation. The approach used was to start with the variable closest to the dependent variable

and end with the variable furthest from the dependent variable. The amount of variability (R^2) accounted for by the variables in each equation, and the adjusted R^2 (based on sample size) were also examined for significance. Table 5 depicts the beta weights and regression coefficients.

Direct Effects

There were 7 direct effects demonstrated that meet the criteria for inclusion in a simplified revised model. The direction and prediction of the direct effect for each variable in the model that meet the above criteria are depicted in the simplified path diagram (Figure 3).

The examination of the results by hypothesis indicates that three of the four research hypotheses concerning direct effects between variables were completely supported, and that one hypothesis received partial support. All direct effects demonstrated are in the specified direction in the revised, simplified model. All variables remain in the revised, simplified model with the addition of the dependent variable perception of behavioral controllability (Figure 3). A minimum level of significance, $p < .05$, was set to test the hypothesis.

When battering and attribution style are predictor variables for negative self-esteem estimates, the regression coefficient is .27, $F_{19.66}$ ($p < .001$). When battering, attribution style, and negative esteem estimates are predictor variables for helplessness, the regression

Table 5

Beta Weights and Regression Coefficients in Standardized Form

Predictor Variable	Criterion Variable				Attribution
	Behavior	Internal/Cognitive	Helplessness	Self-esteem	
Behavior					
Internal/Cognitive	-				
Helplessness	-.18	-.29**			
Self-esteem	.15	.07	.22*		
Attribution Style	-.06	-.12	-.19*	-.51***	
Battering	-.47***	-.33**	.45***	.14	.10
R ² =	.31	.26	.38	.29	.01
Adjusted R ² =	.28	.23	.36	.27	-.00
F =	10.84***	8.45***	19.51***	19.66***	.99

* $p < .05$

** $p < .01$

*** $p < .001$

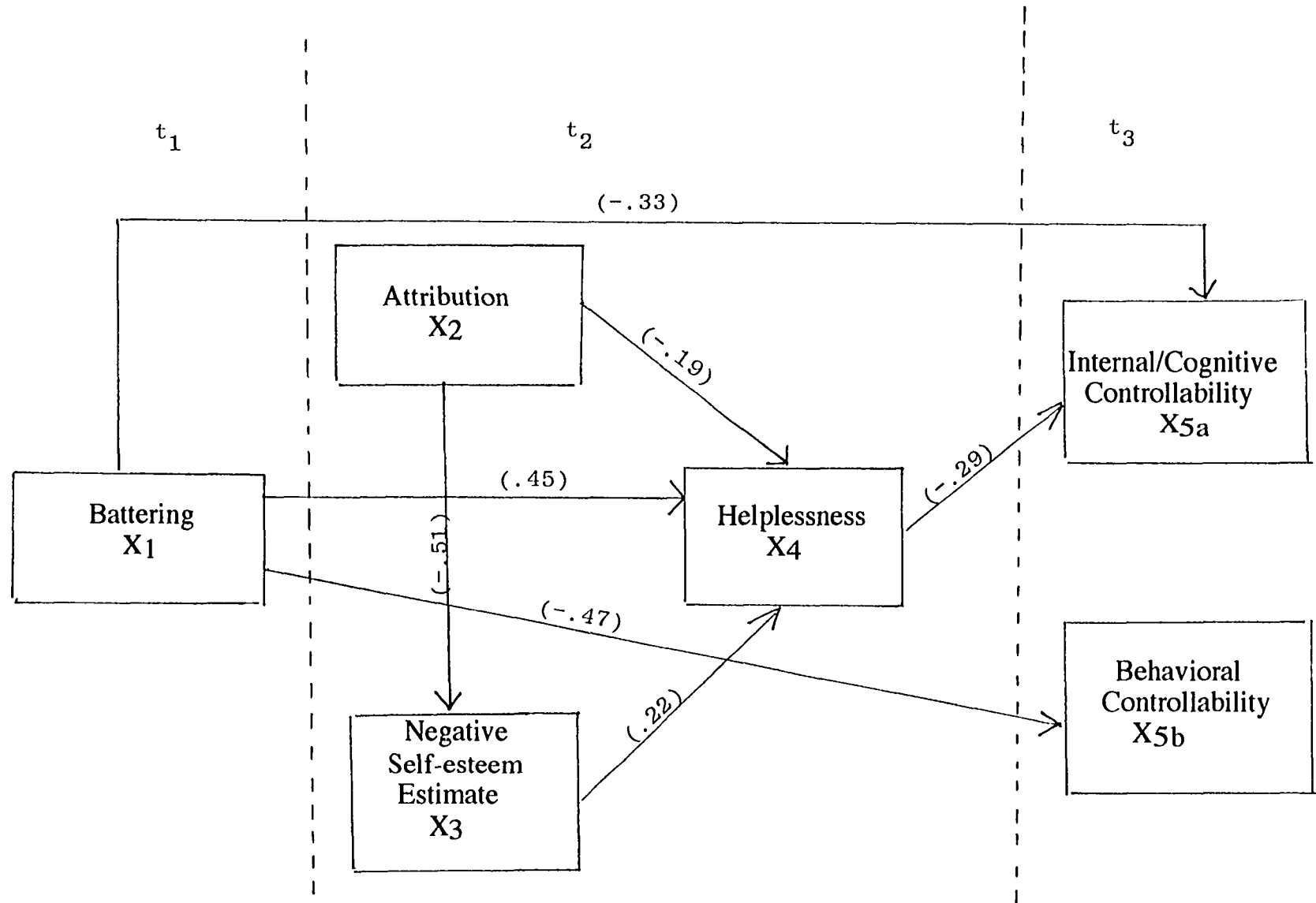


Figure 3. Simplified Causal Model: Controllability of Violence

coefficient is .36, F 19.51 ($p < .001$). When battering, attribution style, negative self-esteems, and helplessness are predictor variables for behavioral controllability, the regression coefficient is .28, F 10.84 ($p < .001$). When battering, attribution style, negative self-esteem estimates, and helplessness are predictor variables for internal/cognitive controllability, the regression coefficient is .23, F 8.45 ($p < .001$) (see Table 5).

Testing the Hypotheses: Direct Effects

Hypothesis 1 addressed the direct effect of battering upon attribution style, self-esteem estimates, and perceived controllability of violence. This hypothesis was partially supported. The direct positive effect of battering upon attribution style was not supported (path coefficient $-.10$) nor is the positive direct effect of battering upon self-esteem estimates supported (path coefficient $.14$). A significant direct effect was demonstrated between battering and perceived controllability of violence with both the internal/cognitive control variables (path coefficient $-.33$, $p < .01$) and the behavioral control variable (path coefficient $-.47$, $p < .001$).

Hypothesis 2 addressed the direct effect of attribution style for positive events on negative self-esteem estimates and a battered woman's perception of helplessness. The hypothesis was supported with attribution style demonstrating a significant inverse effect on self-esteem (path coefficient

-.51, $p < .001$) and a direct inverse effect on helplessness (path coefficient $-.19$, $p < .05$)

Hypothesis 3 was supported. Negative self-esteem estimates demonstrate a direct positive effect on helplessness (path coefficient $.22$, $p < .05$).

Hypothesis 4 was supported. Helplessness demonstrates a significant direct inverse effect on internal/cognitive perception of controllability (path coefficient $-.29$, $p < .01$). However, helplessness was shown to have a significant direct inverse effect on behavioral controllability.

One direct positive effect demonstrated in the data but not proposed as a research hypothesis was found. There is a direct positive effect exerted by battering upon perceived helplessness (path coefficient $.45$, $p < .001$).

Indirect Effects

An important application of path analysis is the analysis of correlations into components. Within a causal model, it is possible to determine what part of a correlation between two variables is due to the direct effect and what part is due to indirect effects. It is useful to decompose a correlation into a direct effect and the total indirect effects. It is then possible to determine the magnitude of each of the components and discern their contribution (Kerlinger & Pedhazur, 1973, p. 317).

A decomposition table was constructed to analyze the indirect and total effects existing among the variables (Page,

1986, pp. 296-298). Column A presents the total bivariate correlation coefficients, while column B presents the direct effects. These direct effects are the beta weights or path coefficients from the regression analysis, as previously noted on the revised, simplified path diagram (see Figure 3). The total indirect effect, column C, is calculated by adding the multiplicatives of the beta coefficients of each of the indirect pathways. The total effect column D is the sum of the direct and indirect effects. The non-causal or spurious effects reported in Column E are derived by subtracting the total effects from the total covariance. Table 6 represents these findings.

The strongest indirect effects demonstrated in the analysis is exerted by battering upon internal/cognitive controllability ($-.11$) through helplessness, negative self-esteem estimate and attribution style. Another strong effect is exerted by attribution for positive events upon helplessness ($-.11$) through negative self-esteem estimates.

Testing the Hypotheses: Indirect Effects

Hypotheses 5 addressed the indirect effect of battering upon perception of controllability through attribution style, negative self-esteem estimates, and helplessness. This hypothesis received support. An indirect effect is demonstrated to be exerted by battering upon the dependent variable of internal/cognitive perception of controllability ($-.11$) and the dependent variable of behavioral perception of controllability ($-.06$).

Table 6

Decomposition Table of Effects of Variables

	Total Covariance A	Direct Effects B	Indirect Effects C	Total Effects (B+C) D	Non causal Effects (A-D) E
Internal/Cognitive Perception of Control (X5 _a)					
X5 _a X4	-.39**	-.29**	None	-.29	-.10
X5 _a X3	-.05	.07	-.06	.01	-.05
X5 _a X2	-.02	-.12	.09	-.03	.01
X5 _a X1	-.45**	-.33**	-.11	-.44	-.01
Behavioral Perception of Control (X5 _b)					
X5 _b X4	-.34**	-.18	None	-.18	-.16

(Table continues)

Table 6 (Continued)

Decomposition Table of Effects of Variables

	Total	Direct	Indirect	Total	Non causal
	Covariance	Effects	Effects	Effects	Effects
	A	B	C	(B+C)	(A-D)
				D	E
x5 _b x3	.02	.15	-.04	.11	-.09
x5 _b x2	-.03	-.06	-.06	-.01	-.02
x5 _b x1	-.53**	-.47***	.06	-.53	0
Helplessness (X4)					
x4x3	.40**	.22*	None	.22	.18
x4x2	-.35**	-.19	-.11	-.30	-.05
x4x1	.51**	.45***	.06	.51	-.001

(Table continues)

Table 6 (Continued)

Decomposition Table of Effects of Variables

	Total Covariance A	Direct Effects B	Indirect Effects C	Total Effects (B+C) D	Non causal Effects (A-D) E
<hr/>					
Self Esteem (X3)					
X3X2	-.52**	-.51***	None	-.51	-.01
X3X1	.19	.14	.05	.19	.000
Attribution Style					
X2X1	-.10	-.10	None	-.10	.0000
<hr/>					

** p. < .01

*** p. < .001

Hypothesis 6 addressed the indirect effect of Attribution Style on Perceived Controllability through Self-esteem Estimates and Helplessness. This hypothesis received partial support. An indirect effect was demonstrated to be exerted by Attribution Style upon the dependent variable Internal/Cognitive perception of Controllability (.09) and upon the dependent variable of behavioral perception of controllability (.06).

Hypothesis 7 addressed the indirect effect of Self-esteem Estimates on Perceived Controllability through Helplessness. The hypothesis received support. A minimal indirect effect was exerted by Self-esteem Estimates upon the dependent variable of Internal/Cognitive Perception of Controllability (-.06) and the dependent variable of Behavioral Perception of Controllability (-.04).

An indirect effect not identified as a research hypothesis was also demonstrated. The available data indicated that there was an indirect effect exerted by Battering on Internal/Cognitive Controllability of violence through Helplessness (.13).

It is evident from an examination of the simplified path diagram that the model includes all variables originally predicted. However, the theoretical direct effects anticipated between Battering and Attribution Style, and between Battering and Negative Self-esteem Estimates are not demonstrated. Also one significant direct effect not anticipated but demonstrated to exist is discovered between

Battering and Perception of Helplessness. All direct effects are in the direction predicted in the proposed model. The indirect hypotheses also received support in this study.

Twenty-eight percent of the variance observed is explained by the model using behavioral perception of controllability as the dependent variable ($\text{Adj. } R^2 = .28$). When internal/cognitive perception of controllability is the dependent variable 23% of the variance is explained ($\text{Adj. } R^2 = .23$).

Summary of the Results

The original theoretical model explains factors influencing a battered woman's perception of controllability of violence in an intimate relationship. All the original variables are retained in the revised, simplified model. The exogenous variables explain the variance in the direction proposed, internal-cognitive control ($\text{Adj. } R^2 = .23$) and behavioral control ($\text{Adj. } R^2 = .28$). The variables in the model demonstrate a moderate amount of influence upon perception of controllability of violence for battered women. Instruments used in the study demonstrate moderate to strong reliability and factorial validity is established for the Chin Perceived Control in Interpersonal Conflict Scale.

Chapter Five

Discussion

The purpose of the present study was to examine selected influences and consequences of battering upon battered women's perceptions of controllability of violence in an intimate relationship. Using a path analytic model the relationships among the exogenous variable of battering, and the endogenous variables of attributional style, negative self-esteem estimate, and helplessness upon perceptions of controllability of violence were explored. It was theoretically argued that an exposure to repetitive battering would directly reinforce the battered woman's attributional style, and would inversely influence her self-esteem estimation. It was further argued that battering would indirectly influence her perception of helplessness, and directly and indirectly influence her perception of controllability of violence.

Sample

The characteristics of this study's sample of 100 self-identified battered women who volunteered to participate in the study did differ from those reported in the literature in terms of age, educational level, and socioeconomic status (Gelles, 1974; Star, 1978; Walker 1979). The mean age of the

study sample was 38.5 years as compared to other reported samples such as: Walker (1979) mean age 32.2 years, Arias (1984) mean age 26 years, Malloy (1986) mean age 30 years, or Johnson (1987) 56% of the sample between 20-29 years of age. The sample also reported a higher educational level than those identified in earlier literature (Gelles & Straus, 1988; Walker, 1979).

In prior studies, the marital violence was observed most frequently among women from families of low-economic status (Gayford, 1975; Gelles & Cornell, 1985; Gelles & Straus, 1988; Straus, Gelles, & Steinmetz, 1980). The socioeconomic level of the present study was middle class. Sixty-nine percent of the women reported employment outside of the home. This is very different from samples of battered women who reported extreme financial dependence upon their abuser in the initial national sample of Gelles (1976) and in later studies of Kalmuss and Straus (1982), and Gelles and Cornell (1985). Strube and Barbour (1983) demonstrated that both economic dependence and commitment were significantly related to battered women's decisions to leave an abusive relationship. Johnson (1987) also found financial considerations to be an important factor influencing the decision-making processes of battered women.

The fact that many of the study subjects reported employment outside of the home may have influenced their perceptions of controllability. They may experience less resource dependency upon their violent partner than other

groups of battered women reported in the literature. Their support systems outside of the relationship may be significantly different from those reported by women in studies where fear (Hilberman & Munson, 1978; Rounsaville, 1978), emotional investment, commitment, and psychological dependency (Kalmuss & Straus, 1982; Strube & Barbour, 1983) may have influenced their perceptions of their relationship and their role within the relationship. In the literature, women with marketable vocational skills were less apt to return to a violent relationship once they had left the relationship (Strube & Barbour, 1983).

Another factor that distinguishes this sample from those reported in previous literature is that 65% of the population was Caucasian as compared to the predominantly black samples (Gelles & Straus, 1988; Walker, 1984) available in other studies. None of the women who participated in the study were currently shelter residents. This could be a factor significantly influencing the study's findings. Seventy-five of the women reported to have ongoing contact with their abusers. This could reflect the existence of an attribution style that reinforces beliefs about the violence experience. It could also indicate that differences exist among women for perceptions of controllability and attribution relative to specific points in the cycle of violence as identified by Walker (1979; 1984). Beliefs about the violent episode, and attributions made regarding the violence, may differ during the cyclic pattern of the experience. The tension mounting

in Phase One, and then being released in Phases Two and Three, may influence attribution and perception of controllability.

The women in the sample reported exposure to family violence in their family of origin (abused as a child: 26%; observed parental violence: 52%). Since the nature of a possible intergenerational transmission of violence is unclear and developmental issues related to women's socialization as victims of violence are undeveloped (Koslof, 1984), it is difficult to speculate as to the influence a childhood history of violence may have had upon women's perceptions of controllability not only of violence but also upon other aspects of their lives. However, the high incidence of violence exposure in childhood does offer support for Star's (1980) assertion that family interactions underlie family violence. It also supports the proposition that abusive patterns are learned within the family (Aries, 1984; Leach, 1990; McCall & Shields, 1986).

Hypotheses

In terms of the research hypotheses generated for this study, of the seven hypotheses illustrating the theoretical rationale for the study five were completely supported, one is partially supported and one is not supported. Each of the hypotheses will be discussed.

Battering and Controllability

The first hypothesis addressed the proposed effects of battering on attribution style, self-esteem estimates and

controllability. Battering did demonstrate a significant direct inverse effect on perceived controllability of violence. Women with high scores on the Index of Sexual Abuse (mean 90.3, S.D. 22.3) had lower scores on the Chin Perceived Control in Interpersonal Conflict Scale (mean 192, S.D. 14, range 157 - 222).

While the literature reviewed does not directly address the relationship between battering and perceived control of violence, the findings of the present study do support the findings of other researchers who identified control issues among the battered women in their studies.

Prange (1985) postulated that the incongruity between the battered woman's expectancy to control her partner's violent behavior and a knowledge that she did not have control was a major factor in the decision of whether to return to a battering relationship or not. Those women who could see that the control of violence was not dependent upon their actions more frequently decided not to return to the violent relationship. These findings are supported by Malloy (1986), and Landenburger (1987). Malloy (1986) identified perception of control and self-efficacy as a factor influencing a woman's decision to leave an abusive relationship. Landenburger (1987) implied that control is an element of entrapment and endurance in an abusive relationship.

The study results regarding the relationship between battering and controllability of violence also offer support

for the theoretical view regarding object noncontingency and a resulting motivational deficit (Garber & Seligman, 1980). Repetitive battering, following ineffective responses to control the episodes, reduces the abused woman's perception that she is in a position to exercise control over the battering. The battered woman may develop strategies to experience a violent episode at a time when she feels physically or psychologically able to tolerate the violence or able to deflect the violence directed toward her children or toward herself, but she does not perceive herself capable of controlling the violent episode. She may learn with experience to modify the violence experience but she does not control the experience. With repeated battering, the woman gives up hope that her actions can be effective in stopping the uncontrollable aversive stimuli of violence.

Battering, Attribution Style and Self-esteem

Two parts of the first hypothesis regarding direct effects between battering and attribution style and battering and self-esteem estimates were not supported. In this sample of self-identified women, battering did not demonstrate a significant direct effect on either attribution style or self-esteem estimates. The correlation between battering and attribution style did not reach a significant level ($r = -.10$). The correlation between battering and negative self-esteem did not reach a significant level ($r = .19$).

Theoretically the woman would cognitively review experiences in similar situations and evaluate the

effectiveness of past responses in controlling the aversive stimuli. Based upon this review, attribution would be made for present and past contingency (Mikulincer, 1986). The literature supports the idea that battered women possess an internal attribution style for negative life events as initially demonstrated in battered women by Walker (1979; 1984) that is similar to that demonstrated in studies of self-blame (Miller & Porter, 1983), and victimization (Janoff-Bulman & Frieze, 1983). Support for the generalization of attribution dimensions for global, stable attributions is less evident (Peterson, et al., 1982).

After data reduction in the present study, the variable of attribution was measured using the Attribution Style Questionnaire (ASQ) composite score for positive events. Difficulties with the utilization of the ASQ, in this study, could account for the inability to support the proposed relationship between battering and attributional style. In the ASQ, events generating information about attributions regarding negative life events reflected: difficulty getting a job, talking in front of a group, problems with completion of work, assisting a friend and experiencing trouble on a date. The ASQ deals with second-order derivations. Perhaps first-order derivatives ("If I kept the kids quiet...") would produce responses more relevant to the violent experience (Prange, 1985). For this sample of battered women ASQ scores ranged from 9 - 16.17. The mean score was 12.49 with a S.D. 1.86. This would indicate that the women tended to make

internal, stable, specific attributions for "good" events in their lives.

A significant difference may exist between an individual's attribution for negative life events and those for positive life events. Miller and Porter (1983) have cautioned that self blame may play a significant role in coping among victims of violence. A woman's ability to cope may be determined more by how she feels about the internal factor she blames than the formal properties of the attribution (stable versus unstable; specific versus global, etc.) (Miller & Porter, 1983, p. 150). It may be necessary to develop an attribution style measurement focusing upon events specific to violence or abuse in order to measure the attributional style of battered women in violent relationships. Qualitative research methodologies would be a useful approach to the development of such a psychometric instrument.

Lowered self-esteem estimates have been a common factor identified in studies with battered women (Johnson, 1987; Star, 1978; Walker 1984). It was hypothesized that repeated battering combined with the inability to control battering would pose a major threat to the self resulting in a self-esteem deficit. However, in this particular sample of women the hypothesized relationship between battering and self-esteem estimate is not supported. There continues to be debate regarding self-esteem and its relationship to battering in domestic violence. Are the scores on self-

esteem scales indicative of a lowering of self-esteem estimates resulting from the violent experience, or is the low self-esteem observed in battered women core level low self-esteem?

The mean self-esteem score for the study sample was 58.91 with the cutting score 30 (± 5); scores above thirty indicate clinically significant problems with self-esteem. The range of negative self-esteem estimate scores for this sample was 58 (low: 27; high: 85). The implication may be that the characteristics of this sample, an older population with higher educational preparation, economic level and employment, could have influenced their scores on the Index of Self-esteem and their relation to the battering experience. Other possible factors, explaining the absence of the proposed relationship, could be the fact that the women in the sample were self identified, self recruited, and not living in a shelter environment. In addition few women reported recent exposure to severe battering.

The Attribution, Self-esteem, Helplessness Triangle

Significant direct effects were demonstrated among attribution style, negative self-esteem estimation and perceived helplessness. It was proposed that women who make internal attributions for the noncontingent outcomes may develop a set of cognitive and emotional deficits represented by helplessness. In this sample, attribution for positive events (Attribution Style Questionnaire Mean 12.4, S.D. 1.8) demonstrated a significant direct inverse effect on negative

self-esteem estimations. The greatest direct effect among variables in the model exists between attributional style and self-esteem estimate (path coefficient $-.51$).

Peterson and Seligman (1983) propose that the internality of causal beliefs affects self-esteem levels. If the person explains bad events by an internal factor, then lowering of self-esteem occurs; if they explain those same events by an external factor the loss of self-esteem does not appear to occur. The present study findings would appear to support the central prediction of learned helplessness theory that an explanatory style exists for individuals that invoke internal causes for bad events that tends to lead to depression (Peterson & Seligman, 1984).

As women's attributions for positive life events rise self-esteem estimates become lower. As the self-esteem estimates become lower, their sense of helplessness rises. However, in the present study the women's attribution style responses were in relation to positive events. Study findings may have been of greater significance in support of the theory if negative life events had been analyzed as the attributional focus.

For women, a great deal of emotion is invested in the marriage union (Ferraro & Johnson, 1983). Many women who marry adopt the roles of wife and mother as primary to their sense of self. In Western society, the motivation for women to succeed in both the marriage and ascribed family roles is strong. When marital disharmony occurs, continuity of the

marriage becomes the central focus for the women (Goldner, 1991). Battered women blame themselves when expectations of the intimate relationship and the family are not met to make sense of their world and reestablish meaning for their relationships. This accepting of responsibility negatively influences their perception of controllability, their decision-making, and their problem-solving (Clearhout, Elder, & Janes, 1982).

The likelihood of taking action to end violence exposure depends upon the woman's state of helplessness and lower self-esteem estimate. The greater the state of helplessness the less likely action will be taken to end violence exposure. The greater the woman's negative estimate of self-esteem the less power she will reveal for controlling aversive events. Victims of marital violence are more likely to tolerate abusive acts when they have been socialized to believe that they are helpless and have experienced noncontingency of action. The more the woman internalizes self-blame for the violent act the less likely she will be to end the violent relationship (Johnson, 1987; Wood, 1987).

In addition, in the present study, attribution style for positive events exerted a significant indirect effect on helplessness through the variable of self-esteem (indirect effect $-.11$, and total effect $-.30$). Attribution style also exerted a significant direct inverse effect on helplessness (path coefficient $-.19$). This provides further support for the theoretical perspective that attributional style is a

predictor of affective, cognitive and motivational deficits observed in individuals experiencing negative life events (Peterson, et al., 1982; Sweeney, Anderson, & Bailey, 1986). The study also supports the findings of low self-esteem estimates and the presence of behaviors reflecting helplessness among battered women.

It is the causal attribution established in the third step of the process that establishes the context for developing a sense of helplessness. The resulting cognitive deficit produces learning that responses and outcomes are noncontingent and the emotional deficit results in a perception of uncontrollability producing feelings of threat and anxiety. The woman experiences a lack of incentive to initiate voluntary responses to control the violent relationship.

The present study also supports findings of previous investigations into the relationship between attribution, self-esteem estimates and perceived helplessness. Quellet and Joshi (1986) found a strong correlation existed among loneliness, depression, and self-esteem estimates among French undergraduate students who identified themselves as lonely. While the relationships and effects of the learned helplessness triangle are supported, the mediator role of attribution and negative self-esteem estimates are questionable. Brewin and Furnham (1986) demonstrated that internal attributions for real and hypothetical events were correlated with self-esteem in undergraduate students.

For the present study, no research hypothesis was proposed regarding a direct effect of battering upon helplessness. While logically a direct would exist, theoretically no direct effect would be proposed between battering and helplessness since both attribution style and self-esteem estimates would be expected to function as mediator variables (Garber & Seligman, 1980; Peterson, 1982; Peterson & Seligman, 1984). However, this was not the case. In fact, no significant indirect effect was demonstrated between battering and helplessness.

Zautra, Guenther, and Chartier (1985) reported that they had found attributions for positive events either positively correlated or not correlated with those for negative events. Their study failed to support the reformulated learned helplessness prediction that a single process is responsible for attributions made regarding outcomes. Internal stable attributions in their study are primarily associated with high self-esteem. This could be the case in the present study and needs to be given further consideration.

In summary, the revised model suggests that significant relationships do exist among the research variables. Battering did have a direct negative effect upon the perception of controllability of violence among a sample of self-identified battered women. Attribution style, self-esteem estimates, and helplessness directly and indirectly influence perceptions of controllability of violence. The

greatest direct effect demonstrated in the model was between attribution style and negative estimates of self-esteem (-.52). Significant direct effects were demonstrated to exist between battering and behavioral perceptions of controllability (-.47) as well as between battering and helplessness (.45) for this sample of battered women. The greatest indirect effect reflected in the model exists between attribution style, self-esteem estimate, and helplessness.

The conceptual framework of the original over-identified model was based upon a review of the literature and previous research related to learned helplessness theory, control, and domestic violence. All the originally proposed variables remain within the revised simplified model. Six of the proposed linkages of the theoretical framework were confirmed by the data supporting the interrelatedness of the variables

Strengths and Limitations

Internal validity. Variables identified in the revised simplified model demonstrate explanation credibility and are plausible (Krathwohl, 1985). This is demonstrated through strong explanatory power (.84) and the ground breaking nature of the study. The total sample of 100 women was adequate for a power of .84 based on an effect size of .12, four independent variables, and a probability level of .05. This would mean that there was only an eighty-four per cent chance of rejecting the null hypothesis when seeking an effect size of .12. This reduced the chance of a Type II error in hypothesis testing (Hinkle, Wiersma, & Jurs, 1979, p. 154).

Data analysis revealed that the majority of the research hypotheses were supported completely or in part by study data. Even though the theoretical underpinnings of the study were developed within the constraints of the laboratory setting they appear to translate into the complex context of the battering relationship. The simplified model supports the Reformulated Learned Helplessness Theory of Depression (Garber & Seligman, 1980). The final model demonstrates explanatory prediction.

The unit of analysis was appropriate to the research question, research methodology, and statistical analysis applied. The data gathering processes were appropriate for application of the results to intervention with battered women. Psychometric instruments used in the study demonstrated high standards for validity and reliability except for one dimension of the Attribution Style Questionnaire (ASQ). The instruments used in the study are believed to reflect the theoretical concepts and definitions and were applied consistently throughout the study. Standardization of instrument administration was possible since there was only one data collector.

It is assumed that study subjects accurately reported their perceptions of battering, attribution, self-esteem, helplessness, and controllability of violence. The self-identified, battered women do represent the group to which the results apply. The length of time taken to respond to the research packet did not appear to be problematic. Individuals

did express some confusion initially which required further instructions when completing the Attribution Style Questionnaire.

Statistical analysis procedures were appropriate to the research methodology (Asher, 1983). Sample size was adequate for the statistical analysis (Munro, 1986). Path diagrams, constructed tables and figures, and the discussion indicated the direction and statistical significance of the effects of each of the research variables clarifying the model. The statistical package SPSS Release 4.0 for DECstation, running on a DEC system 5810 under ULTRIX 4.1, was used to analyze the data.

The relationships suggested by the present study provide support for previous research findings. The present study also links findings regarding the research variables to previous studies through its theoretical framework.

Of the possible rival explanations offered by Krathwohl (1985) only selection interaction may be an issue in the present study. Subjects were recruited from community agencies, women's groups, college campuses and through local newspapers. While this increases the generalizability of this study over previous studies of sheltered women, it introduced the issue of self-selection. Recruitment efforts may have attracted those who felt more strongly about their experience, those who had experienced more positive life events, those who had higher self-esteem estimates, and those who felt less threatened by their experience.

The present study has strong internal validity (Krathwohl, 1985). The simplified model suggests that the research variables play a role in influencing battered women's perceptions of controllability of violence in an intimate relationship.

External validity. The results of the present study are limited to battered women who have experienced similar degree, severity, frequency and length of violent relationships as those recruited for this study. The generalization of the study findings to women in shelters is uncertain. Another sample of 100 recruited women from the same geographical areas may not produce the same research findings. However, some threat to external validity was controlled by using all shelters for battered women in Los Angeles County for recruitment and advertising the study in a preselected pattern of the Supervisory District throughout Los Angeles County.

The complex and sensitive nature of the phenomenon under study, changing social issues and policies, and the nature of the subjects electing to participate in this research make replication of the study considerably challenging. If replicated, different measurements may not produce similar results. This is especially true for the Attribution Style Questionnaire.

All the study instruments demonstrated strong psychometric properties, had clear dimensions, and measured constructs as defined for the study.

This study had strong internal validity and modest external validity. Limitations to the study center around the issues of sampling and instrumentation.

Implications

Education implication. It has been established that domestic violence, specifically wife abuse, is a significant pervasive societal problem (Campbell & Humphreys, 1984). It is also suggested that family violence is possibly perpetuated through intergenerational transmission (Aries, 1984). The pervasive and extensive nature of the problem enhances the possibility that every nurse in clinical practice will have contact with a battered woman during their career. This being the case, nursing educational programs should include instruction on the issues of domestic violence in their curriculum. This instruction needs to occur at the undergraduate level, graduate level, as part of in-service courses and in continuing education courses.

This is particularly true of nursing curricula in programs offering instruction in the care of the family, home health nursing, community health nursing, and public health nursing. Some states have made the inclusion of material related to domestic violence mandatory for state accreditation. Education in the area of domestic violence needs to address the identification of commonly held myths and beliefs regarding abusive relationships, and consciousness raising in addition to the presentation of

information. Emphasis is needed upon issues of control of violence in intimate relationships.

Strategies for teaching problem-solving and decision-making approaches within the context of the abusive relationship are recommended. Discussion should include the concepts of self-blame, control, self-esteem, and attribution of life events as perceived by battered women. Specific issues and strategies involving environmental enrichment, attribution retraining, and internal control skills for women who have experienced abuse would be critical topics.

Placing wife abuse into its historical, political, social and legal context would be important for exploring the role of both the abuser and the abused in this phenomenon (Yllo & Bogard, 1988). Addressing wife abuse from a more feminist perspective would address the question of where responsibility for abuse actually belongs. It is important that those who assist and attempt to empower battered women be helped to realize that the control of battering is not the responsibility of the woman but of the abuser and in part society. This cognitive shift in the attribution of responsibility has been identified as a factor in changing a battered woman's experience with violence (Johnson, 1987; Landenburger, 1987; Prange, 1985). It may also be important for shifting legal and policy

perspectives about domestic violence (Bersharov, 1990; Gondolf, 1985; Yllo & Bogard, 1988)

Clinical implications. Regardless of the nature of the interaction with an acknowledged, or suspected, battered woman, intervention should focus on empowering the individual through fostering growth. The present study supports the argument that cognitive, affective and motivational deficits can exist for those women who are exposed to repeated violence in an intimate relationship. Growth needs to occur in the areas of attribution for life events, problem-solving, and decision-making.

Several theoretical bases for promoting change and fostering personal growth currently exist (Freeman, Simon, Beutler, and Arkowitz, 1989; Seligman, 1991). It is the role of the clinician to evaluate the effects of different approaches; to assess which strategies work best with individual clients. This is especially true for battered women who may be engaged in various phases of their abusive relationships (Landenburger, 1987; Prange, 1985; Wood, 1987). An important aspect of any approach to intervention with battered women must be that those working with the woman do not maintain control in their relationships with the woman. Such a relationship would not foster the development of personal control skills by the woman. General therapeutic strategies should involve: environmental enrichment, personal control training, resignation training and attribution retraining (Peterson, 1982).

The practices of highly structured shelter environments and regimented daily scheduling of residents' lives need to be reconsidered from this perspective. Battered women need to be making decisions on all levels about their lives, situations and their environment in a protective but growth facilitating context. The present study would suggest that assisting women to develop behavioral coping and controlling strategies to deal with their abusive relationship may be especially effective. Women's decisions to return to battering relationships need to be respected and explored with them. The development of survival strategies are essential. It is important to remember that battering in an intimate relationship is only one aspect of that relationship for the women involved.

Change in expectancies is also important to shift cognitive perspectives regarding success and failure. Opportunities for change are created by exposing the women to experiences that restructure and reinterpret response contingency. Group work is very useful for altering attribution by encouraging interaction with others who have had similar experiences. The woman can realize that what she has been experiencing is normal given the life crisis experienced. She can also realize that the experience is not the result of her inadequacies (Prange, 1985).

Those working with battered women should assess the beliefs, and expectations about the abusive relationship from the battered woman's perspective. Nurses, therapists, and

counselors could use this information to identify incongruities between expectations, beliefs and the reality of the situation. This approach would also facilitate an exploration of the use of rationalization as a coping strategy often used by the battered woman (Ferraro & Johnson, 1983; Pagelow, 1981) to cope with the battering relationship.

Intervention should be short-term and goal-directed, emphasizing the modeling of problem-solving and decision-making strategies. In all circumstances, options and alternatives need to be identified with the women and the final course of action selected by the woman. The woman can experience greater feelings of helplessness by actions of well-meaning but uncontrollable social agencies (Peterson, 1982). Women need to experience success with response dependent outcomes. Good outcomes in the areas of health, parenting, employment and friendships can increase perceptions of controllability through altering response and outcome contingencies.

No matter what the ultimate goal of interactions with the battered woman, leaving the relationship or finding a way to survive within the relationship, the nurse must serve as a patient or client advocate. This is especially true for those battered women who may be temporarily experiencing the deficits associated with learned helplessness and decreased perception of controllability over violence.

Research implications. The study of violence in relationships is inherently difficult (Follingstad, 1990;

Laslett, 1973). Generalizing from findings is often difficult. Conclusions are limited and often restrict the ability to determine specific future research directions (Follingstad, 1990).

Future research efforts are suggested related to the present study. Research directions fall into two major categories: instrumentation and replication.

The Chin Perceived Control in Interpersonal Relationship Scale (CPCICS) demonstrated strong reliability and factorial validation with this sample population. Further psychometric testing of the instrument is indicated. Currently no instrument exists in the public domain that measures the concept of control of interpersonal conflict.

While the Attribution Style Questionnaire (ASQ) developed by Seligman and his associates (1982) reported reliability and validity, the dimension attempting to measure internal attribution for negative events could not be used with this sample of battered women. An instrument addressing attributions for issues specific for the battering experience may be more informative and measure the variable with greater validity and reliability.

The suggestion is that instruments be developed that measure women's attribution for life events using their own perceptions of their experience. Follingstad (1990) also suggests that aspects of questionnaire development need to address the sophistication and complexity of abuse. This would include issues of: "the designation of original

hypothesis, the reframing of precise questions, and the development of meaningful response options" (Follingstad, 1990, p. 20). It would also be beneficial for greater generalization and the identification of meaningful commonalities if instruments, and questionnaires, were more standardized for empirical investigations. The use of valid comprehensive interviewing schedules would also be beneficial.

The present study has demonstrated support for the research hypotheses. Its replication with other samples of battered women as well as its replication with a general sampling of women is suggested. Since control samples are often difficult to identify, using general populations of women in investigations of domestic violence could facilitate the comparison of traits among and between different groups of women.

Another issue that arises from this study is the need to subgroup women based upon the nature of their abusive relationship. These subgroups could be developed on the dimensions of severity of abuse, frequency of abuse, nature of the abuse, length of time in the relationship, prior disengaging attempts from the batterer to name a few. The distance in time from the most recent abusive incident could be a significant factor influencing perceptions of controllability of violence in the relationship and needs to be distinguished in future investigations.

The present study suggests that variables other than those addressed in the study influence perceptions of control in abusive relationships. It is important to identify those factors through further investigations. Physical and psychological factors influencing perceptions of control such as developmental issues, fear, isolation, social and marital dependency, limited resources and supportive public services, need to be identified and the degree of their influence determined. Information about these factors could provide effective strategies for empowering battered women.

Research providing further support for the relationships identified in the simplified model should be conducted. The relationships among battering, attribution style, and self-esteem estimation that were not supported in the present study require further empirical investigation. This is especially true for the nebulous and perplexing relationship that exists between battering and self-esteem. It remains to be understood whether low self-esteem estimates are the result of battering or if low self-esteem estimates are present prior to experiencing violence.

It is also important to understand why the theoretical proposition regarding the mediator effect of attribution style and self-esteem estimate was not supported in this study. Several directions for further study are suggested. The nature of battering may be a unique form of aversive stimuli. The fact that battering, as an aversive stimuli, is repetitive and occurs randomly in a familiar environment may

influence the cognitive processes. The mediator effect of attribution style and self-esteem estimate may manifest itself in a different manner outside of the laboratory setting.

In the greater context of domestic violence, several implications for future empirical investigation are evident both from the present study and from the literature review. Investigations tend to be independent, not building upon prior studies. This trend needs to be reversed. This would increase the generalization of research findings and provide a basis for creation of effective therapeutic intervention and establishment of usable public policy formation.

Much consideration, thought, and planning regarding appropriate sampling approaches in future studies is recommended. Sample selection and the recruitment of samples need to address specific subgroups of battered women. There needs to be a standardization of women's experiences in the context of intimate relationships, family relationships and society. Gathering research data from general populations of women will help accomplish this (Follingstad, 1990). Demographic data gathered on these populations also needs to be standardized in some extent so comparisons and contrasts of populations on specific traits can be facilitated.

This study used the underlying theoretical framework of learned helplessness. Future studies need to use a theoretical framework that would help to increase the integration of research findings, organizing knowledge

generated, and help to establish linkages between studies. Connections can be established among broad human behavioral theories that would keep the studies from being so narrowly focused and issue oriented (Follingstad, 1990; Gondolf, 1985; Yllo & Bogard, 1988). Theories that appear appropriate include: Aggression Theory (Bandura, 1973), Reformulated Learned Helplessness (Garber & Seligman, 1980), and Resource Theory (Goode, 1971). More recent theories such as Helpseeking Theory (Gondolf, 1988) and Post-Traumatic Stress Disorder (Haley, 1987) may also have relevance for the study of the phenomenon of battering. Approaching the phenomenon from a developmental perspective also might be beneficial as an organizing structure.

From a feminist perspective, several implications also arise relevant to future research efforts. From the feminist perspective, traditional research questions regarding wife abuse reflect cultural stereotypes of women, men, and families (Bersharov, 1990; Bogard, 1988). Bogard (1988) suggests that questions regarding violence in intimate relationships need to address issues related to not only the abused but also the abuser and the special context in which they coexist. The kinds of research questions asked need to be revised. The focus needs to shift from the abused woman to the male abuser and the historical, social and legal underpinnings of abuse.

Researchers need to place the family and the dynamics of the family into its historical context. The questions of how

women come to accept responsibility for the experience of domestic violence, especially wife abuse, and how they are socialized as appropriate victims of violence require much study.

Summary

This correlation study focused upon the relationship of factors that might influence battered women's perceptions of controllability of violence in an intimate relationship. Variables investigated included battering, attributional style, self-esteem estimates, and helplessness. The resultant parsimonious, simplified model supported the theoretical framework used and previous research findings of other researchers. The use of path analytical statistical techniques indicated that battering has a significant direct influence on perceptions of controllability of violence and upon helplessness. The study also suggests that attribution style strongly influences negative self-esteem estimates and perceptions of helplessness. Internal validity and external validity concerns were discussed and a high level of internal validity was demonstrated in this initial investigation into factors influencing control in domestic violence. Implications drawn from the present study for education, practice and future research are suggested. In addition research directions for the exploration of wife abuse as a complex multifaceted phenomenon are identified.

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Appendix A
Demographic Profile of 100
Battered Women

Age	Frequency	Race	Frequency
18-20	4	Asian	1
21-30	20	Black	26
31-40	40	Caucasian	66
41-50	22	Latino	6
51-65	14	Other	1

Education	Frequency	Marital Status	Frequency
< 9th grade	1	Single	6
9th grade	2	Married	58
12th grade	16	Separated	13
Some College	37	Widow	4
Assoc. Degree	26	Divorced	18
Bacc. Degree	11	Cohabiting	1
Masters degree	7		

Income	Frequency	Religion	Frequency
< \$20,000	6	None	3
\$21,000-30,000	22	Catholic	11
\$31,000-40,000	39	Jewish	8
\$41,000-50,000	23	Protestant	38
> \$50,000	10	Other	5

Employed	Frequency	Abuser	Frequency
No	30	Husband/ex	
Yes	70	husband	73
		Lover/exlover	20
		Someone else	7

Number of Children	Frequency	Years in The Relationship	Frequency
None	27	1-5	24
1	11	6-10	29
2	30	11-15	25
3	15	16-20	11
4	9	21-25	6
5	6	26-30	1
6	1	31-50	4
7	1		

Degree of Battering	Frequency	Violence Increased Over Time	Frequency
One Time	3	Yes	68
Once a week	8	No	32
Once a month	13		
Occassionally	43		
> Once a week	9		
Other	24		

Frequency Increased Over Time	Frequency	Have Left the Relationship in the past	Frequency
Yes	83	Yes	53
No	17	No	47

Number of Other Abusive Relationships	Frequency	Age of Abuser	Frequency
0	69	18-20	4
1	4	21-30	15
2	16	31-40	43
3	6	41-50	24
4	5	51-60	9
		61-67	6

Experienced Abuse as a Child	Frequency	Observed Parental Violence as a Child	Frequency
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Yes	26	Yes	52
No	74	No	48

History of Depression	Frequency
-----------------------	-----------

Yes	18
No	82

Currently on Medications	Frequency
--------------------------	-----------

Yes	25
No	75

Appendix B

Dr. Walter W. Hudson
Arizona State University
School of Social Work
Tempe, Arizona 85287
(602) 965-3304

Permission To Use The Index of Spousal Abuse

The Index of Spousal Abuse (ISA) as copywrited material and may only be used with written permission of the author Walter Hudson. This letter grants you permission to use the ISA, so please keep it on file.

The questionnaire may be used only for academic research.

Sincerely,

Walter Hudson
Arizona State University
School of Social Work
Tempe, Arizona

Appendix C
UNIVERSITY of PENNSYLVANIA

Psychology Department
Professor Martin E. P. Seligman
3815 Walnut Street
Philadelphia, PA 19104-6196

PERMISSION TO USE THE ATTRIBUTIONAL STYLE QUESTIONNAIRE

The Attributional Style Questionnaire (ASQ) is copyrighted material and may only be used with the written permission of the author, Dr. Martin E. P. Seligman. This letter grants you permission to use the ASQ, so please keep it on file. This questionnaire may be used only for academic research or by a clinical psychologist for the diagnosis or treatment of patients. It may not be used for profit or any corporate-related activities.

Thank you for your understanding and consideration in this matter.

Sincerely,

Dr. Martin E. P. Seligman, Ph.D.
Professor of Psychology
Director of Clinical Training

MEPS:tbs

Enc.

Appendix D

WALMYR Publishing Co.
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Tempe, AZ 85285-4779
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Dear WALMYR:

Enclosed is my check or money order for purchase of the printed assessment instruments (50 per pad) shown below.

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Address: Department of Nursing
City: Los Angeles State: CA Zip: 90032
Phone: 213-343-4700 Your FAX Number: _____
Today's Date: 12/20

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Index of Brother Relations		\$ 10.00	\$ _____
Index of Sister Relations		\$ 10.00	\$ _____
Sexual Attitude Scale		\$ 10.00	\$ _____
Index of Homophobia		\$ 10.00	\$ _____
Children's Behavior Rating Scale		\$ 10.00	\$ _____
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Appendix E

Conditions of Agreement

I/~~we~~ agree to the following conditions for the use of the Learned Helplessness Scale in my/~~our~~ research:

1. Sign and return the two enclosed letters of agreement.
2. Return to us the following upon completion of your research (whether published or unpublished):
 - 2.1. Purpose of your study;
 - 2.2. Instruments used in the study;
 - 2.3. Sample to include size, characteristics (i.e., gender, age, health status, where the sample was obtained), and type (e.g., random, convenience, etc.);
 - 2.4. Descriptive and inferential statistical results of your study (including graphs and/or tables if available);
 - 2.5. Recommendations; and
 - 2.6. Return of this information (i.e., 2.1 to 2.5) to us as soon as possible following the completion of the study (results whether research is to be submitted for publication or not).

Sign and send both copies of this agreement, a stamped self-addressed envelope and one dollar for postage and handling to Mary Anne Nelson at 98 Sunset Avenue, Glen Ridge, New Jersey 07028.

Name _____
 Signature _____
 Address _____
 Date _____

Frances W. Guinless .

Marv Anne Nelson

Name _____
 Signature _____
 Address _____
 Date _____

Date March 13, 1989

Name _____
 Signature _____
 Address _____
 Date _____

Appendix F



THE PSYCHOLOGICAL CORPORATION[®]

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January 28, 1992

Patricia A. Chin, RN, MSN
 724 Crest Vista Drive
 Monterey Park, CA 91754-3748

Dear Ms. Chin:

Thank you for your faculty advisor's January 19 letter concerning your request to use the Beck Depression Inventory for testing purposes for use in your dissertation research.

In order to protect the combined usefulness of the test, and as a responsible test publisher, we believe it is our responsibility to maintain the security and integrity of our tests. Consequently, we cannot allow items or portions of the test to be bound in, stapled with or microfilmed with your dissertation.

In addition, all testing should be conducted in your presence or that of your faculty advisor so that all test materials remain in your hands.

We will gladly grant permission for use of the test if the above restrictions will be adhered to. Please sign and return a copy of this letter to me for my files. You may then contact Sue Smith in Qualifications at (800) 228-0752, ext. 293, to place an order for your materials. Please indicate to Mrs. Smith that you are to receive a 50% discount on the materials.

If you have any questions regarding the above please contact me directly.

Sincerely,

Christine Doebller
 Supervisor
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Appendix G

CHIN PERCEIVED CONTROL IN INTERPERSONAL CONFLICT SCALE (CPCICS)

Interpersonal conflicts, disagreements, or disputes are a fact of everyday life. The purpose of this questionnaire is to find out how people deal with situations involving conflict. Each person approaches conflict situations differently. There are no right or wrong ways to exercise control.

Please take a few minutes to reflect on a situation of serious conflict or disagreement. While thinking about this conflict please indicate how strongly you agree or disagree with each of the statements listed below. For each statement please place an X in the box which best indicates your response.

- 1 = strongly disagree
 2 = disagree
 3 = disagree somewhat
 4 = somewhat agree
 5 = agree
 6 = strongly agree

	1 Strongly Disagree	2 Disagree	3 Somewhat Disagree	4 Somewhat Agree	5 Agree	6 Strongly Agree
1. I control the onset of interpersonal disputes by being assertive.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. No matter how hard I try I can never prevent interpersonal disagreements from getting worse.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. I control the outcome of interpersonal conflicts by offering alternative actions and solutions to issues creating the disagreement.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. A person like myself has little chance of preventing the escalation of an interpersonal conflict once it has begun.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. I manage interpersonal disputes by not talking with the other person.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. By "creating a scene" in public I can influence the increasing tensions in an interpersonal conflict.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. No matter how hard I try I cannot stop the escalation of interpersonal disputes once they have begun.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. I can control the ultimate outcome of an interpersonal dispute by discovering what is frustrating the other person.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. I control the escalation of interpersonal conflicts by crying.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

CODE NO. _____

	1 Strongly Disagree	2 Disagree	3 Somewhat Disagree	4 Somewhat Agree	5 Agree	6 Strongly Agree
11. I can influence the outcome of an interpersonal conflict because I can take advantage of controlling opportunities.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. I can successfully control the outcome of most interpersonal disputes.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. I maintain control in interpersonal conflicts because I am a strong person.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. No matter how hard I try I can never influence the outcome of an interpersonal dispute.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15. I cannot prevent interpersonal disagreements from escalating because the other person is usually a more powerful controlling person.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16. I can gain control of a dispute situation by trying to understand what is going on with the other person and pointing out common issues and ideas.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17. I can successfully control most interpersonal conflicts.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18. I influence the ultimate outcome of interpersonal disagreements by reasoning clearly with the other person.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
19. I can prevent interpersonal disputes by withdrawing from the other person.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20. I keep interpersonal conflicts from getting more intense by storming out of the room.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
21. I can influence the onset of an interpersonal dispute by understanding what is going on with the other person and pointing out common issues and ideas.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
22. I reduce the intensity of an interpersonal dispute by reasoning with the other person.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

CODE NO. _____

	1 Strongly Disagree	2 Disagree	3 Somewhat Disagree	4 Somewhat Agree	5 Agree	6 Strongly Agree
23. It helps to plan ahead how to reduce the escalation of interpersonal disputes by reasoning logically with the other person.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
24. A person like myself has little chance of protecting myself or my interests when involved in an interpersonal conflict.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
25. I can control the onset of interpersonal disagreements by trying to discover what the other person wants or why they are angry.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
26. When I am involved in an interpersonal dispute the outcome will depend upon my abilities and skills in dealing with the other person.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
27. I can avoid most interpersonal conflicts by taking sides with those involved who have the greatest power and control.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
28. No matter how hard I try, or what I try, I can not influence the outcome of interpersonal conflicts.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
29. I find that I can control interpersonal disagreements by reasoning with the other person.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
30. I have learned that the outcome of interpersonal disputes will depend upon the desires of the other individual involved not my actions.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
31. I can gain control over interpersonal disputes by taking action before the other person can.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
32. I control the outcome of interpersonal disputes by trying to understand the other person's needs and concerns.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
33. I can influence the escalation of an interpersonal conflict by trying to understand the other person's point of view.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

CODE NO. _____

	1 Strongly Disagree	2 Disagree	3 Somewhat Disagree	4 Somewhat Agree	5 Agree	6 Strongly Agree
34. I gain control of the escalation of interpersonal conflicts by letting the other person have their own way.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
35. In public I can escape interpersonal conflicts by "creating a scene".	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
36. It helps to plan ahead how to best avoid interpersonal disputes so that I am in greater control of the situation.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
37. A person like myself will have little or no chance of influencing the outcome of an interpersonal conflict.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
38. I control interpersonal conflicts by pointing out the factors that are contributing to the conflict.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
39. Whether I can gain control over interpersonal disputes depends upon my own skills and interpersonal abilities.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
40. I find that it is often difficult to determine whether an interpersonal conflict is controllable.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
41. I control the escalation of interpersonal disputes by withdrawing from the other person.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
42. I can control the outcome of interpersonal disputes by reasoning logically with the other person.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
43. It does not help to plan ahead to control the outcome of an interpersonal disagreement since the other person will actually control the outcome.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
44. I can influence the outcome of an interpersonal dispute because I am a strong person.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
45. I prevent interpersonal disagreements by becoming emotional.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
46. I lose control in interpersonal disputes because the other person is usually a stronger more controlling person.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

CODE NO. _____

	1 Strongly Disagree	2 Disagree	3 Somewhat Disagree	4 Somewhat Agree	5 Agree	6 Strongly Agree
47. It does not help to plan ahead how to avoid an interpersonal conflict because the other person will have more control over the situation.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
48. I am capable of influencing the outcome of an interpersonal conflict most of the time.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
49. I control the escalation of interpersonal disagreements by pointing out the obstacle(s) that contribute to the disagreement.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
50. I am directly responsible for the outcome of a dispute in which I am involved.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
51. It does not help to plan ahead to stop the escalation of interpersonal disagreements because the other person will have greater control in the situation.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
52. The ultimate outcome of an interpersonal dispute depends mostly upon my actions and abilities to control the situation.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
53. I can avoid most interpersonal disagreements by reasoning logically with the other person.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
54. I cannot influence the outcome of an interpersonal disagreement because the other person is usually a more powerful individual.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
55. In public I can control the outcome of an interpersonal dispute by "creating a scene".	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
56. I can influence the outcome of an interpersonal dispute by trying to understand what is going on with the other person and pointing out common issues and ideas.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
57. Whether the interpersonal conflict I am involved in escalates depends upon my own abilities and interpersonal skills.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

CODE NO. _____

	1	2	3	4	5	6
	Strongly Disagree	Disagree	Somewhat Disagree	Somewhat Agree	Agree	Strongly Agree
58. I am directly responsible for the outcome of a dispute in which I am involved.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
59. I can control the occurrence of an interpersonal conflict by setting aside my own needs.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
60. I control the outcome of interpersonal conflicts by withdrawing from the other person.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

CODE NO. _____

Appendix H
DEMOGRAPHIC PROFILE

Age _____ years

Years of education

Race

- () Asian
() Black
() Caucasian
() Latino
() Other

- () less than 9th grade
() 9th grade
() 12th grade
() one year past high school
() Associate Degree
() Baccalaureate Degree
() Master's Degree
() Doctorate

Marital Status:

- () Single
() Married
() Separated
() Widow
() Divorced
() Cohabiting

Current Family Income:

- () under \$20,000
() \$21,000 - \$30,000
() \$31,000 - \$40,000
() \$41,000 - \$50,000
() Over \$50,000

Religion:

- () none
() Catholic
() Jewish
() Protestant
() Other _____

Are you currently employed? () yes () no

If yes what is your type of employment _____

What is your relationship to the person who abused you: Circle

husband/ex-husband

Lover/ex-lover

someone else

How many children do you have? _____

Please give their age(s) and sex(es)

Age

Sex

Are you presently living with the person who abused you? () yes () no

How long have you been, or were you, in the relationship with the man who abused you?

_____ days _____ months _____ years

Was the first incident of abuse associated with a particular event? () yes () no

If you are no longer with the person who abused you do you continue to have contact with him?

() yes () no

CODE NO. _____

How often are you, or were you, abused?

- ☐ one time ☐ occasionally, how often _____
☐ once a month
☐ once a week ☐ more than once a week
☐ other, please explain _____

Did the abuse become more frequent over the time? ☐ yes ☐ noDid the violence become more severe over time? ☐ yes ☐ no

When were you last abused? _____

Have you ever left the abusive relationship? ☐ yes ☐ no

How many times have you left for three days or more? _____

What is the longest period you have stayed away? _____

Have you been involved in more than one abusive relationship? ☐ yes ☐ no

How many different relationships? _____

What is the age of the person who abused you _____ years

Were you ever abused as a child ☐ yes ☐ no

If yes what was the nature of the relationship?

As a child did you ever observe violence between your parents? ☐ yes ☐ noDo you have a history of treatment for depression? ☐ yes ☐ no

If yes please explain _____

Are you currently taking any medications? ☐ yes ☐ no

If yes please list them.

UNIVERSITY OF SAN DIEGO
CONSENT TO ACT AS A RESEARCH SUBJECT

Patricia A. Chin, R.N., M.S.N., is conducting a research study to investigate the feelings and perceptions of women who have experienced physical abuse in an intimate relationship. Since I have been selected to participate in this study, I understand that I will be asked questions regarding my personal perceptions and experience with physical abuse. I understand that my participation in this study means that I have contact with the investigator one time and that I will complete several paper and pencil tests.

I understand that completion of the paper and pencil tests will be required one time only taking approximately 60 minutes. Participation in the study should not involve any added risks or discomfort to me.

I understand that my participation in this study is entirely voluntary. I understand that I may refuse to participate or withdraw at any time without jeopardy or prejudice to me. I understand that I can refuse to answer any question on the demographic profile sheet or paper tests. It is clear that I will receive no compensation, financial or otherwise.

I understand that my research records will be kept completely confidential. My demographic sheet and questionnaires will be stored in a locked cabinet for which the researcher possesses the only key. My identity will not be disclosed without consent as required by law. I further understand that to preserve my anonymity only group data will be used in any publication of the results of this study.

Patricia A. Chin, or her designated assistant, has explained this study to me, provided me with an opportunity to ask questions about the study, and answered my questions. If I have further questions or research-related problems, I can reach Patricia A. Chin at (213) 343-4706.

There are no other agreements, written or verbal, related to this study beyond that expressed on this consent form.

I the undersigned, understand the above explanations and, on that basis, I give consent to my voluntary participation in this research.

Signature of Subject

Date

Location

Date

Signature of Witness

Signature of Researcher

Date

Appendix K

Women's *Survival* Guide**EMERGENCY NUMBERS**

Police/Fire/Paramedic 911
 LA. County Child Abuse Hotline
 (Spanish available) (800) 540-4000
 LA. County Elder Abuse Hotline
 (Multilanguages available, TDD) (800) 992-1660
 National Child Abuse Hotline (800) 422-4453
 National Domestic Violence Hotline
 (Spanish available) (800) 333-SAFE

■ EMERGENCY DOMESTIC VIOLENCE SERVICES ■

All programs include 24-hour hotline service, emergency shelter, counseling, legal and social service advocacy, referrals, and assistance with restraining orders.

HOLLYWOOD

Los Angeles Rape and Battering Hotline
 Los Angeles Commission on Assaults
 Against Women (213) 626-3393

ORANGE COUNTY

Domestic Violence Hotline, Orange
 (Spanish available during the day) (714) 992-1932
 Human Options, Laguna (714) 494-5367
 Interval House, Seal Beach
 (Spanish, French, and Vietnamese
 available 9-5, TDD) (714) 891-8121

RIVERSIDE/SAN BERNARDINO COUNTIES

Alternatives to Domestic Violence Crisis Line,
 Riverside (Spanish available during
 the day) (714) 683-0829
 Bethlehem House, Highland
 (24-hour Spanish available) (714) 862-8027
 Desert Sanctuary, Haley House, Barstow (619) 252-3441
 Doves, Big Bear Lake (714) 866-5723
 High Desert Domestic Violence Hotline,
 Victorville (619) 242-9179
 Morongo Basin Unity Home, Joshua Tree (619) 366-8233
 Option House, Colton (714) 381-3471

SAN FERNANDO/ANTELOPE VALLEY

Haven Hills, San Fernando Valley (818) 887-6589
 Valley Oasis, Lancaster (805) 945-6736

SAN GABRIEL VALLEY

Haven House, Pasadena (Spanish available
 during the day, TDD) (213) 681-2626
 House of Ruth (Spanish available 8-5) (714) 988-5559

Women's and Children's Crisis Shelter, Whittier
 (Spanish available) (213) 945-3939
 YWCA Hotline, West Covina (24-hour
 Spanish available) (818) 967-0658

SOUTH BAY

1736 Family Crisis Center,
 Hermosa Beach (213) 379-3620
 Rainbow, San Pedro (24-hour
 Spanish available) (213) 547-9343
 SuCasa, Lakewood (TDD available) (213) 402-4888
 YWCA Women's Shelter, Long Beach
 (Spanish available 8-5) (213) 437-4663

SOUTH CENTRAL/SOUTH EAST

Carson Shelter (213) 549-0137
 Free Spirit of East Los Angeles Chicana Service
 Action center (24-hour
 Spanish available) (213) 937-1312
 Jenesse Center, South Central (213) 755-6836

VENTURA COUNTY

Interface, Newbury Park
 (Spanish available 9-5) (805) 496-1994
 Ventura County Coalition Against
 Household Violence (805) 656-1111

WESTSIDE

Center for Pacific Asian Families Shelter and Hotline
 (24-hour Asian languages available) (213) 653-4042
 Good Shepherd Shelter (213) 737-6111
 Los Angeles Rape and Battering Hotline, Los Angeles
 Commission on Assaults Against Women (213) 392-8381
 Sojourn, Santa Monica
 (limited Spanish available) (213) 392-9896

RAPE HOTLINES

AVANCE/East Los Angeles Rape Hotline
 (Spanish available) (800) 282-6231
 Center for Pacific Asian Families Shelter and Hotline,
 (Asian languages available) (213) 653-4042
 Compton YWCA Rape Hotline
 (Spanish available) (213) 979-6333
 Long Beach Rape Hotline
 (Spanish available) (213) 597-2002
 Los Angeles Rape and Battering Hotline,
 Los Angeles Commission on Assaults
 Against Women (213) 392-8381
 Orange County Sexual Assault Network
 (Spanish available) (714) 831-9110
 Pasadena YWCA Rape Hotline (Spanish, Cantonese,
 and Mandarin available) (818) 793-3385
 Project Sister (Spanish available) (714) 626-4357